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Prevalence of Substance Use Among Racial and Ethnic Subgroups in the United States 1991 - 1993

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Prevalence of Substance Use Among Racial and Ethnic Subgroups in the United States, 1991-1993

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Substance Abuse and Mental Health Services Administration

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TABLE OF CONTENTS

Chapter		Page
LIST OF TABLES		v
HIGHLIGHTS		1
1. INTRODUCTION		5
1.1	NATIONAL HOUSEHOLD SURVEY ON DRUG ABUSE	5
1.2	PURPOSE OF THIS REPORT	6
1.3	LITERATURE ON RACIAL/ETHNIC DIFFERENCES IN SUBSTANCE USE	8
1.4	OVERVIEW OF CHAPTER CONTENTS	10
1.5	LIMITATIONS OF THIS REPORT	11
2. MEASURES AND METHODS		15
2.1	MEASUREMENT OF SUBSTANCE USE, DEPENDENCE, AND NEED FOR TREATMENT	15
2.2	MEASUREMENT OF RACIAL AND ETHNIC IDENTIFICATION	17
2.3	SOCIODEMOGRAPHIC CONTROL VARIABLES	20
2.4	STATISTICAL METHODS	20
3. DEMOGRAPHIC AND SOCIOECONOMIC CHARACTERISTICS OF RACIAL/ETHNIC SUBGROUPS		27
3.1	INTRODUCTION	27
3.2	PERCENTAGE DISTRIBUTIONS OF RACIAL/ETHNIC SUBGROUPS BY DEMOGRAPHIC AND SOCIOECONOMIC CHARACTERISTICS	29
4. PREVALENCE OF SUBSTANCE USE BY RACE/ETHNICITY, AGE, AND GENDER		41
4.1	INTRODUCTION	41
4.2	PATTERNS OF SPECIFIC SUBSTANCE USE	42
4.3	CIGARETTES	44
4.4	ALCOHOL	44
4.5	ANY ILLICIT DRUG	45
4.6	MARIJUANA	45
4.7	COCAINE	46
4.8	NEED FOR ILLICIT DRUG ABUSE TREATMENT	47
4.9	ALCOHOL DEPENDENCE	47
4.10	HEAVY SMOKING	47
4.11	HEAVY ALCOHOL USE	48

TABLE OF CONTENTS (continued)

Chapter		Page
5.	PREVALENCE OF SUBSTANCE USE BY RACE/ETHNICITY, AGE, AND OTHER SOCIODEMOGRAPHIC CHARACTERISTICS	59
5.1	INTRODUCTION	59
5.2	CIGARETTES	63
5.3	ALCOHOL	66
5.4	ANY ILLICIT DRUG	68
5.5	MARIJUANA	69
5.6	COCAINE	71
5.7	NEED FOR ILLICIT DRUG ABUSE TREATMENT	73
5.8	ALCOHOL DEPENDENCE	75
5.9	HEAVY SMOKING	76
5.10	HEAVY ALCOHOL USE	77
6.	CONCLUSIONS	115
7.	REFERENCES	117
APPENDIX A.	ESTIMATION, TESTING, AND SUPPRESSION OF LOW PRECISION ESTIMATES	A-1
APPENDIX B .	NHSDA SAMPLE REDESIGN OPTIONS FOR IMPROVING ESTIMATES OF DRUG USE PREVALENCE IN SMALL RACIAL/ETHNIC SUBGROUPS	B-1

LIST OF TABLES

Table		Page
2.1	Measures of Substance Use, Dependence on Alcohol, and Need for Illicit Drug Abuse Treatment. Respondents Aged 12 and Older, by Gender, 1991-1993.	22
2.2	Estimated Population Sizes of Racial/Ethnic Subgroups: NHSDA 1991-1993 and U.S. Census 1990	23
2.3	Sample Sizes of Racial/Ethnic Subgroups by Age Group, Region, and Population Density: NHSDA 1991-1993	24
2.4	Description of Sociodemographic Variables	25
3.1	Percentage Distribution of Racial/Ethnic Groups by Sociodemographic Variables. Respondents Aged 12 and Older, 1991-1993	32
3.2	Percentage Distribution of Racial/Ethnic Groups by Sociodemographic Variables. Respondents Aged 12-17, 1991-1993	34
3.3	Percentage Distribution of Racial/Ethnic Groups by Sociodemographic Variables. Respondents Aged 18-25, 1991-1993.	35
3.4	Percentage Distribution of Racial/Ethnic Groups by Sociodemographic Variables. Respondents Aged 26-34, 1991-1993	37
3.5	Percentage Distribution of Racial/Ethnic Groups by Sociodemographic Variables. Respondents Aged 35 and Older, 1991-1993.	39
4.1	Percentage of Persons 12 and Older using Cigarettes, Alcohol, Any Illicit Drugs, Marijuana, and Cocaine in the Past Year, Percentage in Need of Illicit Drug Abuse Treatment, Percentage Reporting Dependence on Alcohol, Percentage Reporting Heavy Cigarette Use in the Past Month, and Percentage Reporting Heavy Alcohol Use in the Past Month, By Race/Ethnicity, 1991-1993	49
4.2	Percentage Using Cigarettes in the Past Year, by Race/Ethnicity, Gender, and Age (12-17, 18-25, 26-34, 35 and older), 1991-1993	50
4.3	Percentage Using Alcohol in the Past Year, by Race/Ethnicity, Gender, and Age (12-17, 18-25, 26-34, 35 and older), 1991-1993	51
4.4	Percentage Using Any Illicit Drugs in the Past Year, by Race/Ethnicity, Gender, and Age (12-17, 18-25, 26-34, 35 and Older), 1991-1993	52
4.5	Percentage Using Marijuana in the Past Year, by Race/Ethnicity, Gender, and Age (12-17, 18-25, 26-34, 35 and Older), 1991-1993	53
4.6	Percentage Using Cocaine in the Past Year, by Race/Ethnicity, Gender, and Age (12-17, 18-25, 26-34, 35 and Older), 1991-1993	54

LIST OF TABLES (continued)

Table		Page
4.7	Percentage in Need of Illicit Drug Abuse Treatment, by Race/Ethnicity, Gender, and Age (12-17, 18-25, 26-34, 35 and Older), 1991-1993	55
4.8	Percentage Reporting Dependence on Alcohol, by Race/Ethnicity, Gender, and Age (12-17, 18-25, 26-34, 35 and Older), 1991-1993	56
4.9	Percentage Currently Smoking a Pack or More of Cigarettes a Day, by Race/Ethnicity, Gender, and Age (12-17, 18-25, 26-34, 35 and Older), 1991-1993	57
4.10	Percentage Reporting Heavy Alcohol Use in the Past Month, by Race/Ethnicity, Gender, and Age (12-17, 18-25, 26-34, 35 and Older), 1991-1993	58
5.10	Percentage Using Cigarettes in the Past Year, by Race/Ethnicity and Socio-demographic Characteristics, 1991-1993, Respondents Aged 12 and Older	79
5.11	Percentage Using Cigarettes in the Past Year, by Race/Ethnicity and Socio-demographic Characteristics, 1991-1993, Respondents Aged 12 to 17	80
5.12	Percentage Using Cigarettes in the Past Year, by Race/Ethnicity and Socio-demographic Characteristics, 1991-1993, Respondents Aged 18 and Older	81
5.20	Percentage Using Alcohol in the Past Year, by Race/Ethnicity and Socio-demographic Characteristics, 1991-1993, Respondents Aged 12 and Older	83
5.21	Percentage Using Alcohol in the Past Year, by Race/Ethnicity and Socio-demographic Characteristics, 1991-1993, Respondents Aged 12 to 17	84
5.22	Percentage Using Alcohol in the Past Year, by Race/Ethnicity and Socio-demographic Characteristics, 1991-1993, Respondents Aged 18 and Older	85
5.30	Percentage Using Illicit Drugs in the Past Year, by Race/Ethnicity and Socio-demographic Characteristics, 1991-1993, Respondents Aged 12 and Older	87
5.31	Percentage Using Illicit Drugs in the Past Year, by Race/Ethnicity and Socio-demographic Characteristics, 1991-1993, Respondents Aged 12 to 17	88
5.32	Percentage Using Illicit Drugs in the Past Year, by Race/Ethnicity and Socio-demographic Characteristics, 1991-1993, Respondents Aged 18 and Older	89
5.40	Percentage Using Marijuana in the Past Year, by Race/Ethnicity and Socio-demographic Characteristics, 1991-1993, Respondents Aged 12 and Older	91
5.41	Percentage Using Marijuana in the Past Year, by Race/Ethnicity and Socio-demographic Characteristics, 1991-1993, Respondents Aged 12 to 17	92
5.42	Percentage Using Marijuana in the Past Year, by Race/Ethnicity and Socio-demographic Characteristics, 1991-1993, Respondents Aged 18 and Older	93

LIST OF TABLES (continued)

Table		Page
5.50	Percentage Using Cocaine in the Past Year, by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993, Respondents Aged 12 and Older	95
5.51	Percentage Using Cocaine in the Past Year, by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993, Respondents Aged 12 to 17	96
5.52	Percentage Using Cocaine in the Past Year, by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993, Respondents Aged 18 and Older	97
5.60	Percentage in Need of Illicit Drug Abuse Treatment, by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993, Respondents Aged 12 and Older	99
5.61	Percentage in Need of Illicit Drug Abuse Treatment, by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993, Respondents Aged 12 to 17	100
5.62	Percentage in Need of Illicit Drug Abuse Treatment, by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993, Respondents Aged 18 and Older	101
5.70	Percentage Reporting Dependence on Alcohol, by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993, Respondents Aged 12 and Older	103
5.71	Percentage Reporting Dependence on Alcohol, by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993, Respondents Aged 12 to 17	104
5.72	Percentage Reporting Dependence on Alcohol, by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993, Respondents Aged 18 and Older	105
5.80	Percentage Reporting Currently Smoking a Pack or More of Cigarettes a Day, by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993, Respondents Aged 12 and Older	107
5.81	Percentage Currently Smoking a Pack or More of Cigarettes a Day, by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993, Respondents Aged 12 to 17	108
5.82	Percentage Reporting Currently Smoking a Pack or More of Cigarettes a Day, by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993, Respondents Aged 18 and Older	109
5.90	Percentage Reporting Heavy Alcohol Use in the Past Month, by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993, Respondents Aged 12 and Older	111
5.91	Percentage Reporting Heavy Alcohol Use in the Past Month, by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993, Respondents Aged 12 to 17	112
5.92	Percentage Reporting Heavy Alcohol Use in the Past Month, by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993, Respondents Aged 18 and Older	113

Highlights

Nature and Purpose of this Report

Understanding racial/ethnic differences in the prevalence of substance abuse is becoming increasingly important to policy as the percentage of the U.S. population in racial/ethnic minority groups continues to increase. Based on U.S. Census Bureau projections, about one-third of the U.S. population is expected to be Asian/Pacific Islander, black, Native American, or of Hispanic origin by the year 2010. The socioeconomic disparities among racial/ethnic subgroups in the U.S., combined with the associations between low socioeconomic status and substance abuse, would indicate that an increasing number of members of racial/ethnic minorities may be at risk of substance abuse. Substance abusers face substantial health risks, risks of criminal victimization, and detrimental effects on life chances and prospects for socioeconomic achievement. Understanding racial/ethnic patterns of substance use is necessary if resources for substance abuse prevention and treatment are to be targeted to subgroups and individuals with a high prevalence of substance use.

This report analyzes racial/ethnic patterns of substance use in the U.S. using a more detailed classification of race/ethnicity than has been possible in previous reports that used the National Household Survey on Drug Abuse (NHSDA). In previous research, the small sample sizes of some racial/ethnic subgroups, such as Asian/Pacific Islanders, Hispanic national origin groups, and Native Americans, made it difficult to precisely estimate the prevalence of substance use in these subgroups. This report combines data from three large national surveys, the 1991, 1992, and 1993 NHSDAs, to estimate the prevalences of substance use, alcohol dependence, and need for illicit drug abuse treatment within eleven racial/ethnic subgroups. These subgroups are Native Americans, Asian/Pacific Islanders, non-Hispanic blacks, non-Hispanic whites, and seven subgroups of Hispanics: Caribbeans, Central Americans, Cubans, Mexicans, Puerto Ricans, South Americans, and Other Hispanics. The sample size of more than 87,000 respondents allows us to analyze racial/ethnic differences in substance use while statistically controlling for many sociodemographic characteristics, including age, gender, educational attainment, employment status, and family income. We chose to use the 1991-93 NHSDA data because during these years an oversample of 6 metropolitan areas was selected (Chicago, Denver, Los Angeles, Miami, New York City, and Washington DC) greatly increasing the minority group representation.

Principal Findings

- **Asian/Pacific Islanders.** Asian and Pacific/Islanders are individuals who trace their ancestries to Asia or the Pacific Islands. Individuals of Chinese, Japanese, or Filipino ancestry or origin accounted for about 60% of the Asian/Pacific Islander population (see, e.g., Harrison and Bennett, 1995). This report supports previous research in showing that Asian/Pacific Islanders' prevalences of substance use, alcohol dependence, and need for illicit substance abuse treatment, while clearly high enough to warrant attention, are low relative to those of the total U.S. population. For example, the percentages of Asian/Pacific Islanders aged 12 and older who used

cigarettes, alcohol, and any illicit drug in the past year equal about 22%, 53%, and 6.5%, as compared with about 31%, 66%, and 12% in the total U.S. population aged 12 and older (see Tables 4.1- 4.3). As in the total U.S. population, males have a higher prevalence than females for every substance, but the gender gap is larger among Asian/Pacific Islanders than in the total U.S. population. For example, the percentages of Asian/Pacific Islander males and females using cigarettes in the past year equal about 30% and 14%, respectively, as compared with 34% and 28% among males and females in the total U.S. population (Table 4.1). Given the extensive ethnic diversity of the Asian/Pacific Islander category used here, these data should be interpreted with caution; averages for the overall group may mask significant variations in the prevalence of substance use among subgroups.

- **Hispanics.** Hispanic subgroups vary markedly in their prevalences of substance abuse, alcohol dependence, and need for illicit drug abuse treatment. Relative to the total U.S. population, Mexicans and Puerto Ricans have high prevalences of illicit drug use (including marijuana, cocaine, and other illicit drugs), heavy alcohol use, alcohol dependence, and need for illicit drug abuse treatment. In contrast, Caribbeans, Central Americans, and Cubans, have low prevalences, and South Americans and other Hispanics have prevalences that are close to those of the total U.S. population. For example, the percentage of the population aged 12 and older using any illicit drug in the past year equals about 13% among Mexicans and Puerto Ricans, 7.6% among Caribbeans, 5.7% among Central Americans, 8.2% among Cubans, 11% among South Americans and other Hispanics, compared with about 12% in the total U.S. population (Table 4.3). With respect to past-year cigarette use, Puerto Ricans have a relatively high prevalence, Caribbeans and Central Americans have a relatively low prevalence, and Cubans, Mexicans, South Americans, and other Hispanics have intermediate prevalences relative to the U.S. population (Table 4.1).

- **Native Americans.** Native Americans are persons having origins in and maintaining cultural identification with any of the original peoples of North America, including American Indian tribes and Alaskan Natives. This report supports previous research in suggesting that, relative to the total U.S. population, Native Americans have very high prevalences of past-year substance use (including cigarettes, alcohol, and illicit drugs), alcohol dependence, and need for illicit drug abuse treatment. For example, about 53% of Native Americans aged 12 and older used cigarettes in the past year, versus about 31% in the total U.S. population aged 12 and older. About 20% used an illicit drug in the past year (versus 12%), and about 7.8% were in need of illicit drug abuse treatment (versus 2.7%).

- **Sociodemographic differences in substance use among and within racial/ethnic subgroups.** Sociodemographic differences among racial/ethnic subgroups explain, at least in part, the subgroups' different prevalences of substance use, alcohol dependence, and need for illicit drug abuse treatment. For example, relative to the total U.S. population, individuals in households

with low family income have a high prevalence of past-year use of any illicit drug, and the percentage of population with low family income is higher among Mexicans, non-Hispanic blacks, and Puerto Ricans than in the total U.S. population (Chapter 3). Thus, family income differences partially account for the relatively high prevalences of illicit drug use among Mexicans, Puerto Ricans, and non-Hispanic blacks. Yet none of the sociodemographic variables that are introduced in our analyses, including region, population density, language of interview, family income, health insurance coverage, receipt of welfare, educational attainment, school dropout status, marital status, employment status, and number of children, fully accounts for racial/ethnic differences in substance use (Chapter 5). We also show that, regardless of racial/ethnic subgroup, relatively high prevalences of illicit drug use are found among individuals who reside in the West; reside in metropolitan areas with populations greater than 1 million; would use English rather than Spanish in the NHSDA interview; lack health insurance coverage; are unemployed; have 9 to 11 years of schooling; or have never been married. Moreover, regardless of racial/ethnic subgroup, adolescents who dropped out of school or who reside in households with fewer than two biological parents have relatively high prevalences of past-year use of cigarettes, alcohol, and illicit drugs (Chapter 5).

Chapter 1 Introduction

1.1 National Household Survey on Drug Abuse

The National Household Survey on Drug Abuse (NHSDA) is the primary source of data on the prevalence of substance use in the U.S.[1] This continuing cross-sectional survey of persons aged 12 and over has been conducted periodically since 1971. NHSDAs conducted prior to 1991 had sample sizes of less than 10,000 completed interviews. The sample size increased substantially in 1991 with oversampling in six large metropolitan areas and an expansion of the national sample. These two changes increased the overall sample size to 32,594 respondents. The 1991 research design was largely retained in the 1992 and 1993 surveys, with only modest changes in the questionnaire, sample stratification, and weighting procedures. There were 28,832 respondents in the 1992 NHSDA and 26,489 respondents in the 1993 NHSDA. Substantial revisions were made in both the questionnaire and research design beginning with the 1994 NHSDA.

The NHSDA provides estimates of the prevalence of substance use, consequences of substance use (e.g., problem substance use), and trends and demographic patterns of substance use and abuse. The "surveyed population," that is, the population for which estimates can be made using NHSDA data, is the civilian, noninstitutionalized population aged 12 and older in the United States. The surveyed population is believed to comprise more than 98% of the total population aged 12 and older in the United States. The subpopulations excluded are those residing in institutional group quarters (e.g., prisons, nursing homes, residential treatment centers), those with no permanent address (e.g., homeless people not in shelters), and active military personnel. NHSDA estimates of the prevalence, consequences, and patterns of substance use and abuse are published by the Substance Abuse and Mental Health Services Administration (SAMHSA) in its periodic *Main Findings* series (SAMHSA, 1993, 1995b, c).

The large total sample size of more than 87,000 respondents is the main reason why this report presents data from the combined 1991-93 NHSDAs rather than data from earlier or more recent NHSDAs. A large sample size is needed to obtain satisfactorily precise estimates of drug use prevalence in racial/ethnic subgroups that are small relative to the total population. A second reason for our choice of the combined 1991-93 NHSDAs is that each of these surveys obtained large oversamples from six major metropolitan areas—Chicago, Denver, Los Angeles, Miami, New York, and Washington, D.C.. More than 50% of all respondents in the combined 1991-93 surveys—about 47,000 of the 87,000 total respondents—resided in one of these six metropolitan areas. Because the six oversampled metropolitan areas contain large populations of many of the small racial/ethnic subgroups that are analyzed in this report, the oversampling had the effect of increasing the statistical precision of estimates for these subgroups. Both the large total sample size of the combined 1991-93 NHSDAs and the oversampling of

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[1]The National Commission on Marihuana and Drug Abuse sponsored the first two surveys, conducted in 1971 and 1972. The National Institute on Drug Abuse (NIDA) sponsored the NHSDA from 1974 to 1991. In October 1992, responsibility for conducting the NHSDA and preparing reports was moved to the Office of Applied Studies (OAS) within the newly created Substance Abuse and Mental Health Services Administration (SAMHSA).

large metropolitan areas helped to make the estimates presented in this report more accurate than similar estimates based on other data sources. As discussed in 1.3, previous analyses of racial/ethnic patterns of substance use in the U.S. have been greatly limited by small sample sizes. Starting in 1999, the sample size of the NHSDA will be increased to approximately 70,000 completed interviews per year. The sample will be designed to ensure that every state is represented. This expansion and redesign of the sample will facilitate analyses such as the ones included in this report, and make it possible to do more. In particular, it is expected that it will be possible to produce reliable estimates of substance use prevalence for some Asian subgroups.

1.2 Purpose of this Report

As racial/ethnic minorities continue to increase their percentage of the U.S. population, understanding differences among racial and ethnic subgroups in substance use, risk factors, and odds of receiving treatment becomes increasingly important to policy. While most U.S. residents continue to be non-Hispanic white, the percentage who were Asian/Pacific Islander, black, Native American, or Hispanic increased from about 17% in 1980 to 20% in 1990 and, according to Census Bureau projections, will further grow to 28% in 2000, 32% in 2010, and 40% in 2030 (U.S. Bureau of the Census, 1992). According to the same projections, the fastest growing racial/ethnic subgroups are Hispanics and Asian/Pacific Islanders. Between 1980 and 1990, Hispanics increased their share of the U.S. population by almost 50%, from 6.4% to 9.0%, and Asian/Pacific Islanders nearly doubled their share, from 1.5% to 2.9%. Given that most individuals begin using drugs during adolescence (SAMHSA, 1996a), it is significant that racial/ethnic minorities are expected to account for more than one-third of U.S. students in kindergarten through twelfth grade by the year 2000 (U.S. Department of Education, 1994).

Data from the 1990 U.S. Census show that race/ethnicity continues to be important in American society (Harrison and Bennett, 1995). Among males at every educational level, ethnic minorities —black, Native American, Asian, and Hispanic men—earn substantially less than their white counterparts, usually 10 to 20 cents on each dollar of earnings (there are no comparable differences between the earnings of minority and white women.) While the percentage of blacks with high school degrees has increased rapidly in the post-World War II period, from less than 50% to more than 75%, blacks and other minorities, except Asians, still remain much less likely to receive bachelor's degrees than whites.[2] Poverty rates are more than three times as high among blacks, Hispanics, and Native Americans as among whites.[3]

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[2]The percentages of males 25 years and older in 1990 who completed college equal about 11% for blacks, 10% for Native Americans, 42% for Asian/Pacific Islanders, 10% for Hispanics, and 26% for whites. The corresponding figures for females are 12%, 9%, 32%, 8%, and 19% (Harrison and Bennett, 1995).

[3]Based on the 1990 Census data, the percentage of families in poverty in 1989 equaled about 24% among blacks, 27% among Native Americans, 12% among Asian/Pacific Islanders, 22% among Hispanics, and 7% among whites. While poverty rates declined by about 20% between 1969 and 1989,

Given the socioeconomic disparities among racial/ethnic subgroups, it is not surprising that many minority subgroups have a greater prevalence of substance abuse than individuals in the total U.S. population (NIDA, 1994). Living in relatively unhealthful situations, as evidenced by high levels of poverty and illiteracy, substantially increases vulnerability to substance abuse. The prevalence of substance abuse is also generally higher in urban areas than in suburban or rural areas (SAMHSA, 1993, 1995b, 1995c). Minorities, particularly blacks and Hispanics, may have a higher prevalence of substance abuse than other Americans because the minorities are disproportionately concentrated in central cities.

The adverse consequences to racial/ethnic minorities of substance abuse include substantial health risks. For example, the death rate from alcohol-related causes is three times higher among blacks than among whites (Gary, 1986). In seven major U.S. cities, liver morbidity rates (cirrhosis and other liver diseases associated with alcohol use) were found to be about three times higher among black males aged 25 to 34 than among same-age white males (Herd, 1985). Similarly, cirrhosis mortality among Native Americans has been estimated to be at least four times the rate in the general population (Beauvais and LaBoueff, 1985). Substance abuse also increases likelihood of violence: Harvey (1985) estimated that black men were five times more likely than white men to be victims of homicide, and that at least half of both offenders and victims (regardless of race) had been drinking alcohol at the time of the homicide.

The purpose of this report is to analyze racial and ethnic patterns of substance use in the United States, using a more detailed classification of race/ethnicity than has been possible in previous reports that used the National Household Survey on Drug Abuse. The NHSDA has long been used to monitor trends in substance use among the largest racial and ethnic categories of the United States, including non-Hispanic blacks, non-Hispanic whites, Hispanics, and others. But the relatively small sample sizes of some racial/ethnic subgroups, such as Asian/Pacific Islanders, particular Hispanic national origin groups, and Native Americans, have made it difficult to precisely estimate the prevalence of substance use in these subgroups using data from a single survey year. Small sample sizes have also made it difficult to compare substance use patterns in racial and ethnic subgroups while statistically controlling for such important factors as gender, education, employment, and family income.

This report uses the pooled 1991, 1992, and 1993 NHSDAs to distinguish eleven subgroups. These include Native Americans, Asian/Pacific Islanders, non-Hispanic blacks, non-Hispanic whites, and seven subgroups of Hispanics defined based on national or geographical self-identification: Caribbean, Central American, Cuban, Mexican, Puerto Rican, South American, and Other Hispanic. The large sample size of the pooled 1991-93 NHSDAs, more than 87,000 respondents, also allows us to compare substance use prevalence across racial/ethnic subgroups while statistically controlling for sociodemographic characteristics, including age, gender, educational attainment, employment, and family income.

The particular questions that we explore in this report include:

- How do the prevalences of alcohol, cigarette, and illicit drug use vary across racial/ethnic subgroups?

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the differentials among racial/ethnic subgroups remained roughly the same (Harrison and Bennett, 1995).

- Are there important racial/ethnic differences in the age and gender patterns of substance use? For example, do some racial/ethnic groups tend to use drugs at earlier ages than others? Is substance use more heavily concentrated among males, or among females, in some racial/ethnic groups than in the total U.S. population?

- To what extent do the different social, demographic, and economic profiles of racial/ethnic subgroups account for their different patterns of substance use? For example, is residence in large metropolitan areas always associated with an increased prevalence of illicit drug use, regardless of the racial/ethnic category?

- Are racial/ethnic patterns of dependence on alcohol different from corresponding patterns of substance use?

- Which racial/ethnic subgroups appear to be most in need of illicit drug abuse treatment?

1.3 Literature on Racial/Ethnic Differences in Substance Use

Previous research based on major national surveys has focused primarily on differences in substance use prevalence among three major racial/ethnic groups—Hispanics, non-Hispanic Blacks, and non-Hispanic whites. More is known about racial/ethnic differences among adolescents than among adults in the U.S. because several major national surveys focus on substance use among adolescent respondents.[4] The University of Michigan's Monitoring the Future (MTF) Survey (Johnston et al., 1995), a school-based survey excluding adolescents who were not enrolled, shows that Hispanics have the highest rates of past-month use for most substances in eighth grade, whites have the highest rates in twelfth grade, and blacks in grades eight through twelve are consistently lowest in the use of most substances. For example, based on the combined 1993-94 MTFs, past-month marijuana use was 6% among white eighth-graders and 18% among white twelfth-graders. The corresponding prevalences among Hispanics and blacks were 12% and 15%, and 5% and 13%, respectively. Black secondary school students were also low in binge drinking, with only 14% of black twelfth-graders reporting five or more drinks in the past two weeks, as compared with 32% of whites and 24% of Hispanics. Bachman et al. (1991) combined data from MTF surveys conducted between 1976 and 1989 to show that, during 1976-89, Asian American high school seniors had rates of alcohol, cigarette, and illicit drug use that were even lower than the rates of black seniors, while Native American high school seniors had rates of alcohol, cigarette, and illicit drug use that were higher than those of Hispanic or white seniors.

Another school-based survey, the 1993 Youth Risk Behavior Surveillance System (YRBSS, Centers for Disease Control and Prevention, 1995), suggests that access to illegal drugs may be an important

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[4]This is an appropriate emphasis given that most individuals begin using drugs during adolescence and that adolescent drug use predicts drug use in later life (e.g., SAMHSA, 1996a).

factor affecting racial/ethnic differences in adolescent drug use: About 42% of Hispanic male high school students reported that they had been offered or sold an illegal drug on school property during the 12 months preceding the survey, compared with only 29% of white males and 20% of black males.

In contrast to MTF and YRBSS, NHSDA data for adolescent respondents are not restricted to adolescents who are enrolled in school. The differences between black adolescents and the other major racial/ethnic subgroups in illicit drug use are generally smaller in the NHSDA than in the school-based surveys. One possible explanation is that drug use is generally higher among high-school dropouts than among high-school students of the same age (Oetting and Beauvais, 1990), and blacks are relatively likely to drop out (Harris and Bennett, 1995).

In each of the three broad subgroups, male adolescents are more likely than female adolescents to be past or present substance users, and, at least for cigarettes and marijuana, the gender difference is more pronounced among blacks than among Hispanics or whites. For example, the percentages of males and females aged 12 to 17 reporting past-year marijuana use equaled 15% and 8% among blacks, compared with 14% and 13% among Hispanics, and 16% and 14% among whites (SAMHSA, 1997b, Table 3.5).

Data from the Hispanic Health and Nutrition Examination Survey (HHANES), a national probability sample of Hispanics aged 12 to 74 conducted during 1982 through 1984, suggested that patterns of substance use may differ significantly among major Hispanic subgroups. Mexican Americans and Puerto Ricans were more likely to be past or present drug users than Cuban Americans—for example, 42% of Mexican Americans and 43% of Puerto Ricans, but only 20% of Cuban Americans, reported having ever used marijuana in their lifetimes (NIDA, 1987). Moreover, HHANES suggested that substance use may be higher among Hispanics who are relatively assimilated into American society: Hispanics who preferred to be interviewed in English were two to three times as likely ever to have used drugs as Hispanics who preferred to be interviewed in Spanish. Among Hispanics who had ever used marijuana, Mexican Americans were inferred to have begun use at earlier ages than Puerto Ricans. Given the positive association between beginning drug use and dropping out of school (Chavez and Swaim, 1992), a possible explanation is a higher rate of school dropout among Mexican American adolescents than among Puerto Rican adolescents (see Chapter 3).

Reliable estimates of substance use among Native Americans in the total U.S. continue to be unavailable. (See Appendix B for a discussion of sampling strategies for improving the precision of estimates for Native Americans and other small racial/ethnic subgroups.) Data from a survey of Native American seventh through twelfth graders living on reservations suggest that substance use is generally high among Native American adolescents living on reservations (NIDA, 1995). For example, 83% of Native American high school seniors reported using marijuana in their lifetime, compared with 35% of non-Native American high school seniors in the 1993 MTF. Yet these statistics may not be representative of Native American secondary students in the U.S. because only about 30% of Native Americans live on reservations (Judkins et al., 1992).

Most research on substance use among Asian/Pacific Islanders is based on small surveys conducted by individual researchers or state agencies, with the most consistent finding being that, while the prevalences of substance use and abuse are not insignificant, Asian/Pacific Islanders use alcohol, cigarettes, and illicit substances less frequently than other Americans (Trimble et al., 1987; Murakami,

1989). Consistent with this finding, data from the pooled 1991-93 NHSDAs reported in Chapter 4 below indicate that, across all ages and all drug categories, Asian/Pacific Islanders have lower prevalence of substance use than Hispanics, non-Hispanic blacks, and non-Hispanic whites. Given the extensive ethnic diversity of the Asian/Pacific Islander category used in this report, these and other findings should be interpreted with caution; averages for the overall group may mask significant variations in the prevalence of substance use among ethnic subgroups that are not identified here.

The same data reported in Chapter 4 suggest that Native Americans generally have higher prevalence of substance use, for all drug categories except alcohol, than Hispanics, non-Hispanic blacks, and non-Hispanic whites (see also NIDA, 1995). However, even given the large sample size of the pooled 1991-93 NHSDA data, the number of Native American respondents is too small (n = 416) to support statistically significant findings.

Knowledge of racial/ethnic differences in substance use among adults in the U.S. depends especially heavily upon the NHSDA, because NHSDA is the only major federal survey that regularly collects detailed, confidential data on substance use prevalence among adults aged 18 and older in the U.S. household population. This report provides an unusually detailed presentation of racial/ethnic differences in substance use, both among adolescents and among adults, by pooling data from the 1991-93 NHSDAs.

1.4 Overview of Chapter Contents

Chapter 2 discusses the measurement of adolescent substance use, dependence on substances, and need for illicit drug abuse treatment in the 1991-93 NHSDAs. The chapter also discusses the measurement of racial/ethnic identifications in the 1991-93 NHSDAs, which used questionnaire items on race and Hispanic origin that closely resembled those of the 1990 U.S. Census. Chapter 2 shows that the estimated population percentages in each of eleven racial/ethnic subgroups based on the 1991-93 NHSDA are close to the corresponding percentage in the 1990 U.S. Census. Finally, Chapter 2 discusses the sociodemographic control variables and statistical methods used to analyze the effects of family structure on adolescent substance use.

Chapter 3 presents data on the demographic and socioeconomic characteristics of the eleven racial/ethnic subgroups: Native American, Asian/Pacific Islander, Hispanic-Caribbean, Hispanic-Central American, Hispanic-Cuban, Hispanic-Mexican, Hispanic-Puerto Rican, Hispanic-South American, Hispanic-other, non-Hispanic black, and non-Hispanic white. For all respondents aged 12 and older, the sociodemographic control variables include gender, region, population density, language of the NHSDA interview (Spanish vs. English), and family income. For respondents aged 12 to 17, the sociodemographic control variables also include family structure (residing in a household with two biological parents versus residing with fewer than two biological parents) and school dropout status (enrolled in school vs. not enrolled). For respondents aged 18 and older, the sociodemographic control variables also include educational attainment, marital status, employment status, and number of own children (none versus one or more). For each age group, the results show that racial/ethnic subgroups differ substantially in their sociodemographic profiles, which might account for some racial/ethnic differences in substance use.

Chapter 4 presents the estimated percentages of individuals in each of the eleven racial/ethnic subgroups who used alcohol, cigarettes, and marijuana and other illicit substances; who drank alcohol and smoked cigarettes heavily; who were dependent on alcohol; and who needed illicit drug abuse treatment. We examine the associations between race/ethnicity and substance use both in the total population aged 12 and older and within subclasses defined by age and gender.

Chapter 5 extends the analysis by investigating the associations between race/ethnicity and substance use, after controlling statistically for sociodemographic variables that were introduced in Chapters 2 and 3. Because of limitations of sample size in this detailed analysis, results for Native Americans are not presented and we are only able to distinguish four subclasses of Hispanics: Hispanic-Cuba, Hispanic-Mexico, Hispanic-Puerto Rico, and all other Hispanics.

The final chapter (Chapter 6) summarizes the findings and presents directions for future research.

Appendix A discusses sample weighting, statistical estimates and tests, and suppression of estimates due to low precision.

Appendix B discusses possible changes in the NHSDA sample design that would result in improved estimates of drug use prevalence in small racial/ethnic groups.

1.5 Limitations of this Report

There are four important limitations of this report's estimates of substance use prevalence within racial/ethnic subgroups and comparisons of substance use prevalence across racial/ethnic subgroups. These are a) limitations in the measurement of substance use, b) limitations in the measurement of race/ethnicity, c) limitations in the sociodemographic control variables that are used to analyze racial/ethnic differences in substance use, and d) limitations in the precision of statistical estimates due to the small sample sizes of some racial/ethnic subgroups.

Measurements of substance use in the NHSDA are based on respondents' self-report, and their value depends on respondents' truthfulness and memory. Several studies have established the validity of self-report data (see Harrison, Haaga, and Richards, 1993; NIDA, 1992). The NHSDA procedures encourage honesty and recall; nevertheless, some under- and overreporting was very likely to occur.

Measurements of race/ethnicity in this report are based on respondents' self-identifications with a small number of closed-end response categories that were designed to be consistent with federal statistical policy (see Section 2.2). This measurement approach has four possible problems: First, self-reported racial/ethnic identifications may imperfectly gauge a complex social reality. For example, Isajiw (1974) discusses twelve different "dimensions" of ethnicity— including common national or geographical origin, ancestry, culture, religion, race or physical characteristics, and language—some of which may be imperfectly reflected in respondents' self-reports. Research at the U.S. Bureau of the Census has shown that small changes in the questionnaire instruments that are used to collect data on racial/ethnic identifications can sometimes produce large shifts in the distribution of reported racial/ethnic identifications (Pinal and Lapham, 1992). Second, the questionnaire instruments that were used in the NHSDA to measure race/ethnicity did not allow a respondent to identify with more than one racial subgroup or with more than one Hispanic subgroup. Persons of mixed racial or ethnic backgrounds may have found these questions difficult to answer meaningfully. Third, consistent with

federal statistical policy (U.S. Department of Commerce, 1978), this report classifies self-identified Hispanics as members of Hispanic-origin groups regardless of whether these individuals also identified themselves as Native American, Asian/Pacific Islander, black, or white. Some Hispanic persons who came to the U.S. from Latin American countries with high concentrations of indigenous peoples might be better classified as Native Americans than as Hispanics (Forbes, 1991). Fourth, with the exception of two questions on Hispanic origin (see 2.2), the NHSDA did not collect data on ancestry, which makes it impossible to distinguish such large national-origin subgroups as Filipino-Americans, Vietnamese-Americans, and Chinese-Americans (Barringer et al., 1993). In this report, non-Hispanic members of these and other Asian national origin subgroups are classified simply as "Asian/Pacific Islanders[5]."

The control variables that are used to analyze racial/ethnic differences in substance use in this report include basic demographic variables such as sex and age; geographic characteristics such as region and population density; measures of socioeconomic status such as educational attainment, school enrollment status, employment status, health insurance coverage, receipt of welfare, and family income; measures of family structure and family background such as living arrangements, marital status, and number of own children; and characteristics of the interview itself (whether the interview was conducted in Spanish or in English). These control variables gauge social dimensions along which racial/ethnic subgroups vary and suggest possible explanations of racial/ethnic differences in substance use. For example, adolescents living in households with two biological parents are relatively unlikely to use illicit drugs (SAMHSA, 1996c), and the percentage of adolescents living in such households varies markedly across racial/ethnic subgroups (see Table 3.2 below). Yet many potential control variables that might be important in accounting for racial/ethnic differences in behavior could not be employed in the analyses of this report because these variables were not measured in the 1991-1993 NHSDAs. For example, foreign birth, foreign parentage, and citizenship/naturalization status might be important in interpreting patterns of substance use in racial/ethnic subgroups that experienced large in-migration flows in recent decades (Lieberson and Waters, 1988), but these variables were not measured in the 1991-93 NHSDAs.

A final limitation pertains to the sample sizes that are available in the combined 1991-93 NHSDAs. The large combined sample size of more than 87,000 respondents makes it possible to present more detailed descriptions of racial/ethnic patterns of substance use than was previously possible. However, the racial/ethnic subgroups that are analyzed in this report are still extremely heterogeneous. In part this heterogeneity results from the problems of measuring race/ethnicity, especially the absence of data on ancestry, which precludes analyzing subgroups of Asian/Pacific Islanders. Previous research makes it clear that in addition to sociodemographic differences, patterns of substance use and problems related to substance use vary quite a bit between the ethnic subgroups that make up this category (for an overview see Zane and Sasao, 1992). But because questions that would identify these subgroups were not asked in the 1991-93 NHSDAs, the findings presented here cannot distinguish these variations. It is possible that in some instances, they may cancel each other out to present a very different picture for the group as a

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[5] In conjunction with the expanded sample size beginning in 1999, data on country of ancestry will be collected for Asian and Pacific Islander racial/ethnic groups to provide the ability to estimate drug use prevalence for the largest subgroups.

heterogeneous whole. The heterogeneity of the racial/ethnic groups used in this report also reflects the relatively small sizes of many racial/ethnic subgroups in the U.S. population and the difficulties of designing the NHSDA sample to provide sufficient sample representation of small racial/ethnic subgroups. For example, "Native American" is also a heterogeneous ethnic category, encompassing such subgroups as Eskimos and Aleuts as well as many tribes of American Indians within the continental United States (Snipp, 1986). Yet the small sample size of Native Americans in the combined 1991-93 NHSDAs (n = 416) makes it impossible to include even the broad category "Native American" in the detailed analyses of Chapter 5.

Chapter 6 summarizes some of the important conclusions and policy implications of this report. Appendix B focuses on sample redesign options that might be used to increase the precision of drug use prevalence estimates for small racial/ethnic subgroups.

Chapter 2 Measures and Methods

2.1 Measurement of Substance Use, Dependence, and Need for Treatment

Each NHSDA interview takes about one hour to complete and incorporates procedures designed to maximize honest reporting of substance use. Respondents aged 12 to 17 are allowed to participate in the survey only after the interviewer has received parental permission. In each of the 1991, 1992, and 1993 surveys, more than 40 percent of the adolescent interviews were conducted in complete privacy, with only the interviewer and respondent present, while less than 20 percent were conducted with at least one other person constantly present. (For details, see SAMHSA, 1993, Table B.10; SAMHSA, 1995b, Table B.10; and SAMHSA, 1995c, Table B.10.) Self-administered answer sheets are used by respondents for all alcohol and illicit drug use questions, so that responses are not revealed to interviewers or to any other persons who may have been present at the interview.[1] Respondents are given a guarantee of confidentiality and told that only persons connected with the research will ever see their answers. After the questionnaire is completed, the answer sheets are placed in an envelope that is then sealed and mailed back to the data collection contractor with no name or address information included.

The analyses in this report are based on NHSDA variables that are derived from questionnaire items on substances used in the past year and problems associated with use. The following NHSDA questionnaire items, called "recency" items, were used to determine past-year drug use:

1) Cigarettes: "When was the most recent time you smoked a cigarette?"

2) Alcohol: "When was the most recent time you had an alcoholic drink, that is, beer, wine, or liquor or a mixed alcoholic drink?"

3) Marijuana: "When was the most recent time you used marijuana or hash?"

4) Cocaine: "When was the most recent time you used cocaine, in any form?"

5) Illicit drugs other than marijuana or cocaine: "When was the most recent time you used [name of drug]?"

Respondents who reported that their most recent use of the specified substance occurred within the twelve-month period preceding the interview were classified as having used the substance during the past year. The recency question varies depending on the type of substance. For example, when asking about

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[1]Exceptions to the use of self-administered answer sheets are the questions about tobacco use. In 1991-1993, these questions were interviewer-administered. This procedure was revised in the 1994 NHSDA so that youths now respond using self-administered answer sheets. Results indicate that estimates of youth tobacco prevalence prior to 1994, such as those in this report, are substantial underestimates.

sedatives, tranquilizers, stimulants, and analgesics, the question limits use to "nonmedical use." These forms of drug use make up the illicit drugs along with marijuana, cocaine (including crack), inhalants, hallucinogens, and heroin. In other words, any use of any of these drugs in the past year is identified as use of illicit drugs.

To measure heavy past-month alcohol use, we used responses to the following question:

6) Heavy past-month alcohol use: "On about how many days did you have five or more drinks of beer, wine, or liquor on the same occasion during the past 30 days?"

Individuals who responded five or more days were classified as heavy past-month alcohol users.

To measure heavy past-month cigarette use, we used responses to the following question:

7) Heavy past-month cigarette use: "How many cigarettes have you smoked per day, on the average, during the past 30 days?"

Individuals who responded "about a pack a day (16-25 cigarettes)" or more than a pack a day were classified as heavy past-month cigarette smokers.

We also want to identify patterns of problem substance use. Therefore, two kinds of general indicators of problem use were developed, based on responses to questions about drug problems: a measure of dependence on alcohol and a measure of need for illicit drug abuse treatment. First, each type of substance use identified above has a corresponding dependence indicator that is created from respondents' self-reports of behavioral consequences and dependence symptoms they may have experienced as a result of using the substance during the twelve months preceding the interview. Respondents were asked to identify specific substances that caused them to experience each of seven consequences/symptoms during the year preceding the interview. (The questions were based on questionnaire items and diagnostic criteria presented in the *Diagnostic and Statistical Manual of Mental Disorders, Third Edition* [DSM-III-R; American Psychiatric Association, 1987].) The seven consequences/symptoms were: 1) feeling depressed or losing interest, 2) getting involved in arguments or fights, 3) feeling alone or isolated, 4) feeling nervous or anxious, 5) developing health problems, 6) experiencing difficulty in thinking clearly, and 7) feeling irritable or upset. For each substance, we used the respondents' reports of these seven consequences/symptoms, together with their reports of the most recent time the substance was used, and of their experiences of "trying to cut down" and using more of the substance "to get the same effect," to define five "criteria" of dependence.

A. The substance caused one or more of the seven consequences/symptoms, and the substance was last used during the past month.

B. The substance caused the respondent to get less work done during the past year, and the respondent last used the substance during the past year.

C. The respondent was unable to reduce his or her use of the substance ("cut down") during the past year.

D. The respondent needed more of the substance to get the same effect during the past year.

E. The respondent felt sick when he or she tried to cut down during the past year.

We classified respondents as "dependent on alcohol" during the past year if two or more of the five criteria of dependence were satisfied for alcohol.

Second, following Epstein and Gfroerer (1996), we constructed a measure of the need for illicit drug abuse treatment. A respondent was classified as in need of illicit drug abuse treatment if he or she 1) was dependent on an illicit drug during the past year, 2) reported injection substance use or heroin use during the past year, 3) used sedatives, stimulants, tranquilizers, analgesics nonmedically, inhalants, hallucinogens, or cocaine weekly during the past year, or 4) received treatment for illicit drug use during the past year.

Table 2.1 presents the estimated number and percentage of total persons, and males and females aged 12 and older, who were classified as positive according to this measure. This information is presented for each of the nine measures of substance use, alcohol dependence, or need for treatment, which are defined in this section and analyzed in Chapters 3, 4, and 5. For example, we estimate that there were about 63.4 million persons who used cigarettes in the year preceding the survey, about 31 percent of the NHSDA target population aged 12 and older. Of the 63.4 million past-year cigarette users, 33.1 million were male, accounting for about 34% of the male population aged 12 and older, and 30.3 million were female, accounting for about 28% of the female population aged 12 and older. Standard errors for Table 2.1, and subsequent tables in this report, are presented in the Appendix.

2.2 Measurement of Racial and Ethnic Identification

Several studies have investigated the associations between race/ethnicity and substance use among adolescents and among adults. As mentioned above, the principal advantage of this study is a much larger sample size than previous studies, approximately 87,000 respondents aged 12 and older in the combined 1991-93 NHSDAs, including more than 22,000 adolescent respondents aged 12 to 17, more than 21,000 young adult respondents aged 18 to 25, and more than 44,000 adult respondents aged 26 and older. The large sample size makes possible 1) a more refined approach to measuring race/ethnicity, and 2) more extensive breakdowns by demographic and other social factors in analyzing the associations between race/ethnicity and substance use.

The racial/ethnic classification used in this report is based on responses to three interviewer-administered questions:

1) "Are you of Hispanic or Spanish origin or descent?"

YES ___
NO ___

2) (If yes to preceding question) "Which of these Hispanic-origin groups best describes you?"

Puerto Rican ___
Mexican ___
Cuban, or ___
Some other group (SPECIFY) _____

3) Which of the groups on this card best describes you? Just give me the number.

WHITE ___ 01
BLACK ___ 02
INDIAN (American), ALEUT, ESKIMO ____ 03
ASIAN OR PACIFIC ISLANDER (Including Asian Indian) ___ 04
OTHER (Specify) _____ 05

As stipulated in Statistical Policy Directive No. 15, issued by the Office of Management and Budget (U.S. Department of Commerce, 1978), persons of Hispanic origin (first and second questions) may be of any race (third question). Both in the eleven-category racial/ethnic classification used in Chapters 3 and 4 and in the seven-category racial/ethnic classification used in Chapter 5, an individual's Hispanic origin takes precedence over any racial identification. For example, an individual who was identified as "Hispanic-Mexican" based on the first two questions and as "Indian (American), Aleut, Eskimo" based on the third question was classified as "Hispanic-Mexican" rather than as "Indian (American), Aleut, Eskimo." Similarly, the classifications "black" and "white" as used in this report refer to non-Hispanic blacks and to non-Hispanic whites, respectively.

Write-in responses to the second question, "some other group (SPECIFY)," were used to extend our list of Hispanic-origin groups from four to seven, including "Hispanic-Caribbean" (other than Puerto Rico and Cuban), "Hispanic-Central American" (other than Mexico), "Hispanic-South American," and "Hispanic-Other"(other than Caribbean, Central American, Cuban, Mexican, Puerto Rican, and South American).

Individuals who gave write-in responses to the third question, "OTHER (Specify)," and who were not Hispanic were usually recoded to one of the four explicit non-Hispanic racial categories—Native American, Asian/Pacific Islander, non-Hispanic black, and non-Hispanic white. For example, individuals who reported that they were "African American"were recoded as "black," and individuals who reported that they were "Caucasian" were recoded as "white." A small number of respondents, less than 1%, were statistically imputed to a Hispanic origin or racial classification based on the interviewer-observed race of the respondent and on data on race and Hispanic origin that were collected during household screening. No information is collected on respondents' citizenship or country of birth, and thus, no inferences can be made about either. Details of the recoding of "other Hispanic" and "other race" responses and of the statistical imputation procedures are available from SAMHSA.

Table 2.2 presents the sample sizes (combined 1991-93 NHSDAs) of the eleven racial/ethnic categories that are analyzed in Chapters 3 and 4, and the estimated number and percentage of NHSDA target population persons aged 12 and older in each racial/ethnic category. The eleven categories are

grouped into five major categories: Native American (including American Indian, Eskimo, Aleut), Asian/Pacific Islander, Hispanic, non-Hispanic black, and non-Hispanic white, and there are seven subcategories of Hispanic: Caribbean, Central American, Cuban, Mexican, Puerto Rican, South American, and other Hispanic. Also shown in Table 2.2 are the corresponding population estimates and population percentages of the eleven subgroups based on the 1990 U.S. Census. The population estimates based on the 1990 U.S. Census are larger, because the Census data are not restricted to individuals aged 12 and older, but the estimated population percentages based on the 1990 U.S. Census are closely similar to the corresponding percentages based on the combined 1991-93 NHSDAs.

To be sure, the similarity between NHSDA and Census estimates in Table 2.2 results in part from the procedures that are used to weight the NHSDA data. As discussed in SAMHSA (1993, 1995b, c), the NHSDA sampling weights are post-stratified to ensure that NHSDA estimates of the percentages of U.S. population in demographic subgroups defined by age, sex, Hispanic origin, and race are consistent with Census Bureau projections based on the 1990 Census. The post-stratification procedure explains why NHSDA and Census estimates of the percentages of Asian/Pacific Islanders, Hispanics, Non-Hispanic blacks, and Non-Hispanic whites are similar in Table 2.2. However, the post-stratification procedure does not fully explain the similarity between NHSDA and Census estimates of the percentages of Native Americans and Hispanic subgroups, because this procedure ensures consistency only for subgroups defined by two categories of Hispanic origin (Hispanic, non-Hispanic) and four categories of race (Asian/Pacific Islander, black, white, other).

Table 2.3 presents the sample sizes of the eleven racial/ethnic subgroups by age group (12 to 17, 18 to 25, 26 to 34, 35 and older), region (Northeast, North Central, South, West), and population density (metropolitan statistical area greater than 1 million, other MSA, and not in MSA). The sample sizes are especially small for Native Americans (n = 416), Hispanic-Caribbean (n = 611), Hispanic-Central American (n = 1,962), Hispanic-South American (n = 1,075), and other Hispanic (n = 1,181). The small sample sizes of these five subgroups explain why the eleven-category classification of Chapters 3 and 4 had to be reduced to only seven categories in the detailed analyses of Chapter 5. The racial/ethnic classification of Chapter 5 combines four Hispanic subgroups of Chapters 3 and 4—Caribbean, Central American, South American, and Other Hispanic—into an expanded "Other Hispanic" category, and Chapter 5 does not report results for Native Americans at all.

For brevity in this report, we refer to the Hispanic-Cuban subgroup as "Cubans," to the Hispanic-Mexico subgroup as "Mexicans," to the Hispanic-Puerto Rico subgroup as "Puerto Ricans," to the Hispanic-Caribbean subgroup as "Caribbeans," to the Hispanic-Central America subgroup as "Central Americans," and to the Hispanic-South America subgroup as "South Americans." Except in referring to the results of previous research, this report does not use the terms "Asian-American," "Cuban-American," "Mexican-American," "Puerto Rican-American," and so on. Yet it is worth emphasizing that all of the conclusions of this report pertain strictly to residents of the United States and do not pertain to residents of the countries and geographic areas whose names are used to designate U.S. racial/ethnic subgroups.

2.3 Sociodemographic Control Variables

All analyses in this report are presented separately for adolescents (individuals aged 12 to 17) and older respondents. Chapter 4 broadly describes the associations between race/ethnicity and substance use by controlling only for the gender and detailed age of the respondent (12 to 17, 18 to 25, 26 to 34, 35 and older). With a few exceptions, the analyses of Chapter 4 suggest that racial/ethnic differences in substance use are similar for males and females. Chapter 5 presents a more detailed analysis of the associations between race/ethnicity and substance use, by controlling for a dozen sociodemographic variables in addition to age of respondent (12 to 17 versus 18 and older). The sociodemographic control variables in Chapter 5 depend on whether the respondent is aged 12 to 17 or 18 or older. For respondents aged 12 to 17, the control variables are region, population density, language of interview (Spanish vs. English), family income, health insurance coverage, receipt of welfare by a member of the household, school enrollment, and family structure (living with two biological parents vs. all other living arrangements). For respondents aged 18 and older, the control variables are region, population density, language of interview (Spanish vs. English), family income, health insurance coverage, receipt of welfare by the household, educational attainment, marital status, employment status, and own children (none vs. one or more).

Based on preliminary analyses, we collapsed family income into three income groups according to whether the family income was less than $20,000, between $20,000 and $40,000, or greater than $40,000. Based on research showing a complex, nonlinear relationship between educational attainment and substance use (Zhu et al., 1996), we distinguished four categories of educational attainment: 0-8 years of schooling, 9-11 years, 12 years, and more than 12 years.

Table 2.4 defines the levels of all sociodemographic control variables that are used in this report and also provides the operational definitions of the levels.

2.4 Statistical Methods

Percentage estimates in the text tables of Chapters 3-5 have been rounded to the nearest one-tenth of one percent and screened to determine whether they meet a required level of statistical precision. Differences between racial/ethnic categories and other demographic subgroups that are reported in the text are statistically significant at the .05 level.

Appendix A discusses details of the statistical precision requirements, sample weighting, and statistical estimation and testing techniques. The tables of Appendix A present standard errors for all statistical estimates that are presented in the text of this report. Like the estimates themselves, the standard errors fully take into account the complex sample design of the NHSDA.

In interpreting the statistical estimates of this report, it is useful to remember that associations between variables are more likely to be statistically significant when the sample size is large. Thus, if differences in substance use prevalence by racial/ethnicity are found to be significant in the total population aged 12 and older but not significant within either the 12 to 17 or the 18 and older age groups, this does not mean that there are no real differences by race/ethnicity within age groups. It only means that such differences cannot be inferred given samples of the size used in this report. In general, associations involving substance use or dependence measures with low overall prevalence are more

difficult to identify as statistically significant than associations involving measures with high overall prevalence.

Although statistical significance is an important criterion in interpreting the findings, it should not be the sole one. Some findings of this report involve broad patterns of differential substance use prevalence and dependence by race/ethnicity, patterns that show up in the estimates reported for most or all measures of substance use prevalence and dependence. Such persistent and recurring patterns in the data are often worth noting even when such trends and patterns are difficult to evaluate precisely on the basis of statistical significance tests.

Table 2.1 Measures of Substance Use, Dependence on Alcohol, and Need for Illicit Drug Abuse Treatment. Respondents Aged 12 and Older, by Gender, 1991-1993.

Outcome Measure	Males (n =39,469)		Females (n=48,446)		Total (n =87,915)	
	Population. (millions)[1]	%	Population (millions)[1]	%	Population (millions)[1]	%
Cigarette use- past year	33.1	33.6%	30.3	28.4%	63.4	30.9%
Alcohol use- past year	70.2	71.3	66.1	61.9	136.3	66.4
Any illicit drug use- past year[2]	13.9	14.1	10.5	9.8	24.4	11.9
Marijuana use- past year	11.3	11.4	7.1	6.7	18.4	9.0
Cocaine- past year	3.4	3.5	1.8	1.7	5.2	2.5
Need for illicit drug abuse treatment	3.4	3.5	2.2	2.1	5.6	2.7
Alcohol- dependence	4.9	4.9	2.3	2.1	7.1	3.5
Heavy cigarette use	15.5	15.8	12.7	11.9	28.3	13.8
Heavy alcohol use	8.5	8.6	2.1	2.0	10.6	5.1

[1]The size of the target population for the combined 1991-93 data sets equals the average of the populations represented by the 1991, 1992, and 1993 NHSDAs. The target population comprises 205,257,000 persons, with 98,447,000 males and 106,810,000 females.
[2]Illicit drugs include marijuana, nonmedical use of psychotherapeutics (sedatives, tranquilizers, analgesics, and stimulants), cocaine (including crack), inhalants, hallucinogens, and heroin.

Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table 2.2 Estimated Population Sizes of Racial/Ethnic Subgroups: NHSDA 1991-1993 and U.S. Census 1990

Racial/Ethnic Group	1991-1993 NHSDA (age 12+)*			1990 U.S. Census[1] (all ages)	
	Sample Size	Population Estimate	Pop. %	Population Estimate	Pop. %
Native American (including American Indian, Eskimo, Aleut) [2]	416	1,350,000	0.7	1,960,000	0.8
Asian/Pacific Islander [2]	2,591	5,690,000	2.8	7,270,000	2.9
Hispanic	21,958	17,180,000	8.4	21,900,000	8.8
Caribbean	*611*	*420,000*	*0.2*	*520,000* [3]	*0.2*
Central American	*1,962*	*1,120,000*	*0.5*	*1,320,000*	*0.5*
Cuban	*2,507*	*1,040,000*	*0.5*	*1,040,000*	*0.4*
Mexican	*11,699*	*10,020,000*	*4.9*	*13,500,000*	*5.4*
Puerto Rican	*2,923*	*2,460,000*	*1.2*	*2,730,000*	*1.1*
South American	*1,075*	*760,000*	*0.4*	*1,040,000*	*0.4*
Other Hispanic [4]	*1,181*	*1,360,000*	*0.7*	*1,920,000*	*0.8*
Non-Hispanic blacks	20,744	23,230,000	11.3	29,280,000	11.8
Non-Hispanic whites	42,206	157,820,000	76.9	188,420,000	75.7
TOTAL	87,915	205,260,000	100.0	248,830,000	100.0

1. 1990 U.S. Census data. Data on Hispanic origin by country are based on a sample tabulation of responses to the long form question on ancestry. From U.S. Bureau of the Census, http://venus.census.gov/cdrom/lookup/862430630.
2. Native American (n =826) and Asian/Pacific Islander (n =305) respondents who also identified themselves as Hispanics were classified as Hispanics.
3. The Caribbean estimate from the 1990 Census is based on a sample tabulation of persons who identified themselves as Dominican in responses to the long form ancestry item.
4. The "other" Hispanic category is comprised mostly of respondents who reported a Hispanic group of "Spanish (Spain)" or "Spanish American." This group also includes respondents who indicated that they were Portuguese, Filipino, "mixed," or did not report a specific Hispanic group.

* NHSDA data were post-stratified to 1980 Census tables by age, gender, and race/ethnicity.

Table 2.3 Sample Sizes of Racial/Ethnic Subgroups by Age Group, Region, and Population Density: NHSDA 1991-1993

Racial/Ethnic Group	Total	Age Group				Region				Population Density		
		12-17	18-25	26-34	35+	North-east	North Central	South	West	MSA > 1 Million	Other MSA	Not in MSA
American Indian/ Alaskan Native	416	119	111	107	79	38	55	175	148	206	85	125
Asian/Pacific Islander	2591	767	750	648	426	555	326	608	1102	2295	243	53
Hispanic												
Caribbean	611	170	121	176	144	442	7	156	6	570	37	4
Central American	1962	496	534	595	337	205	56	1023	678	1889	63	10
Cuban	2507	577	593	647	690	135	30	2264	78	2435	65	7
Mexican	11699	3339	3140	3024	2196	112	1271	3404	6912	8379	2813	507
Puerto Rican	2923	830	689	719	685	1763	349	649	162	2598	279	46
South American	1075	280	257	307	231	268	62	582	163	985	74	16
Other Hispanic	1181	289	257	314	321	70	46	216	849	708	170	303
Non-Hispanic blacks	20744	5656	4932	5493	4663	3311	3805	11120	2508	16479	2843	1422
Non-Hispanic whites	42206	9714	9805	11954	10733	7199	9681	14093	11233	26517	8661	7028

Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table 2.4 Description of Sociodemographic Variables

Variable	Levels	Definition
Age	12-17 18-25 26-34 35+	Calculated using date of interview and respondent's reported date of birth.
Gender	Male Female	As determined by NHSDA interviewer.
Region	Northeast North Central South West	U.S. Census Bureau classification
Population Density	MSA >1million Other MSA Not in MSA	U.S. Bureau of the Census definition of Metropolitan Statistical Area based on 1990 population.
Interview	Spanish English	Language used to administer NHSDA. Respondents were given a choice of Spanish or English.
Family Income	< $20,000 $20-40,000 > $40,000	Calculated by summing family members' (respondent's and adult proxies') reports of total income received by all family members from seven sources: 1) jobs or self-employment, 2) Social Security or Railroad Retirement payments, 3) Supplemental Security Income, 4) public assistance or welfare, 5) interest, dividends, rents, royalties, trusts, 6) child support payments, and 7) all other sources.
Education	0-8 years 9-11 years High school only > High school	Respondents' (aged 18 and older) reports of their number of years of school completed.
Employment	Employed Unemployed Not in labor force	Respondents aged 18 or older were asked to look at a card and tell which of several statements best described their present work situation. Employed includes those working full-time, part-time, and who have a job but are not at work because of extended illness, maternity leave, furlough, or strike. Unemployed includes those who are unemployed or laid off and looking for work. Not in labor force includes all other responses including student, full-time homemaker, retired, disabled, or something else.
Marital Status	Married Widow/div/sep Never married	Marital status at time of interview for respondents aged 18 or older.
Own Children	None 1 or more	Based on the number of biological, adopted, and stepchildren living in the respondent's residence at the time of interview.
School Dropout	Yes No	Respondents aged 12-17 were classified as school dropouts if they had not graduated from high school or received a GED, and were not enrolled in any kind of school.
Family Structure	Mother/Father Other	"Mother/Father" households are those identified by the adolescent respondent as including both a biological/adoptive mother and a biological/adoptive father at the time of the interview. "Other" includes all other households including stepparent and one-parent families.

Table 2.4 Description of Sociodemographic Variables (continued)

Variable	Levels	Definition
Health Insurance Coverage	Yes No	Health insurance in the month preceding interview includes private health insurance, Medicaid, Medicare, CHAMPUS, CHAMPVA, VA, or military health care.
Welfare Receipt	Yes No	The respondent or another member of the respondent's family received any kind of welfare in the month preceding the interview.
Number of People in Household	Mean	Number of people living in the respondent's household (including respondent) at the time of interview.

Chapter 3 Demographic and Socioeconomic Characteristics of Racial/Ethnic Subgroups

3.1 Introduction

Using the combined 1991-93 NHSDAs, this chapter presents data on demographic and socioeconomic differences among racial/ethnic subgroups. One purpose is to demonstrate the substantial internal heterogeneity of the eleven racial/ethnic subcategories defined in Chapter 2. Giving attention to this diversity within subgroups helps to negate stereotypes and to suggest the limits of generalization (Collins, 1992). A second purpose is to lay the basis for interpreting the racial/ethnic differences in substance use that are presented in Chapters 4 and 5. Some previous studies have analyzed racial/ethnic differences in behavior without simultaneously controlling for important covariates that are themselves highly associated with the behavior (Ponterotto, 1988), a practice that can give rise to incorrect interpretations of racial/ethnic differences. For example, the percentage using illicit drugs in the past year is higher among individuals aged less than 35 than it is among individuals aged 35 and older (see Table 4.4), while the percent of individuals who are less than 35 years old is higher among Native Americans, Asian/Pacific Islanders, non-Hispanic blacks, and most Hispanic subgroups than among non-Hispanic whites (Table 3.1). Thus, even if there were *no* differences among racial/ethnic subgroups in the percentage using illicit drugs *at each age*, the overall percentage of non-Hispanic whites using illicit drugs would be low relative to most other subgroups simply because relatively many non-Hispanic whites have already passed through the ages when the prevalence of illicit drug is greatest. Similarly, racial/ethnic differences in substance use are at least partially due to differences in the socioeconomic compositions of the subgroups and to geographic and other sociodemographic differences among the subgroups.

For brevity throughout this report, we refer to the Hispanic-Cuban subgroup as "Cubans," to the Hispanic-Mexico subgroup as "Mexicans," to the Hispanic-Puerto Rico subgroup as "Puerto Ricans," to the Hispanic-Caribbean subgroup as "Caribbeans," to the Hispanic-Central America subgroup as "Central Americans," and to the Hispanic-South America subgroup as "South Americans" (for further discussion see Section 2.2).

Based on the detailed analyses of this chapter, some important sociodemographic differences among the eleven racial/ethnic subgroups in 1991-93 are the following:

- **Racial/ethnic differences in age distribution:** As mentioned above, the percent of individuals who are less than 35 years old is higher among Native Americans, Asian/Pacific Islanders, non-Hispanic blacks, and most Hispanic subgroups (Cubans are the notable exception) than among non-Hispanic whites. Central Americans, Mexicans, and Caribbeans in particular have relatively high percentages of individuals in the youngest three age groups.

- **Racial/ethnic differences in regional distribution:** Most racial/ethnic subgroups were concentrated in one or two regions of the country. For example, Native Americans reside mostly in the South (42%) and in the West (36%), while Asian/Pacific Islanders are mostly in the West (51%). Non-Hispanic whites were distributed much more evenly across the four regions.

- **Racial/ethnic differences in population density:** About 75% of Asian/Pacific Islanders and more than 75% of each Hispanic subgroup, except Mexicans (62%) and other Hispanics (31%), lived in metropolitan areas with populations of greater than 1 million. Only four subgroups had more than 10% living in non-metropolitan areas—other Hispanics (47%), Native Americans (41%), non-Hispanic whites (27%), and non-Hispanic blacks (14%).

- **Racial/ethnic differences in the language used in the NHSDA interview:** Among Hispanic subgroups, the percentage who used Spanish in the NHSDA interview was relatively low among Puerto Ricans (7.7%) and other Hispanics (5.1%) and relatively high among Central Americans (50%), Cubans (36%), Mexicans (32%), and Caribbeans (28%).

- **Racial/ethnic differences in family income:** Non-Hispanic blacks, Caribbeans, Central Americans, Mexicans, and Puerto Ricans had lower family income, on average, than Asian/Pacific Islanders, non-Hispanic whites, and Cubans. For example, the percentage of individuals aged 12 and older living in families with incomes less than $20,000 equals about 49% among non-Hispanic blacks, 53% among Caribbeans, 49% among Central Americans, 47% among Mexicans, and 46% among Puerto Ricans. In contrast, it equals about 23% among Asian/Pacific Islanders, 30% among non-Hispanic whites, and 33% among Cubans.

- **Racial/ethnic differences in receipt of welfare and health insurance coverage:** The percentage of individuals aged 12 and older who resided in families in which a member of the household received welfare is relatively high among Caribbeans (20%), Puerto Ricans (18%), Native Americans (15%), and non-Hispanic blacks (14%). The percentage of individuals aged 12 and older with no health insurance is relatively high among Central Americans (48%), Mexicans (37%), Caribbeans (35%), and South Americans (34%).

- **Racial/ethnic differences in educational attainment:** Of the eleven racial/ethnic subgroups, Asian/Pacific Islanders, non-Hispanic whites, and South Americans had the highest percentages of individuals aged 18 and older who had some education beyond high school (61%, 47%, and 45% respectively). Mexicans, Central Americans, and Caribbeans had the highest percentages with eight or fewer years of education (33%, 33%, and 29%, respectively).

- **Racial/ethnic differences in marital status:** The highest percentages of never-married individuals were found among non-Hispanic blacks (32% of individuals aged 18 and older), Central Americans (30%), South Americans (28%), and Asian/Pacific Islanders (28%).

- **Racial/ethnic differences in employment status:** Of the eleven racial/ethnic subgroups, Native Americans reported the highest percentage of individuals who were unemployed (16% of those aged 18 and older). Non-Hispanic blacks and the Hispanic subgroups, except Cubans, had

between 8% and 12% unemployed. Non-Hispanic whites (5.0%), Cubans (5.5%), and Asian/Pacific Islanders (5.8%) reported the lowest percentages of unemployed.

- **Racial/ethnic differences in number of own children living in the household:** The percentage of young adults living with a child of their own was relatively low among Asian/Pacific Islanders (6% of individuals aged 18 to 25) and Cubans (11%), and relatively high among Mexicans (35%), Central Americans (34%), and non-Hispanic blacks (31%).

- **Racial/ethnic differences in household size:** The mean number of individuals per household ranged from a minimum of 3.0 among non-Hispanic whites to a maximum of 4.5 among Central Americans and Mexicans.

- **Racial/ethnic differences in school enrollment status:** Native Americans (7.9%), other Hispanics (5.8%), Central Americans (5.1%) and Mexicans (4.8%) had relatively high percentages of individuals aged 12 to 17 who had dropped out of school, compared with Asian/Pacific Islanders, South Americans, and non-Hispanic whites who had relatively low percentages of 1.5%, 1.7%, and 1.9% respectively.

- **Racial/ethnic differences in family structure:** The percentage of adolescents aged 12 to 17 living in households with both a mother and a father was relatively low among Native Americans (35%), non-Hispanic blacks (36%), and Caribbeans (41%), and relatively high among Asian/Pacific Islanders (78%), other Hispanics (69%) and non-Hispanic whites (66%).

The next section presents statistical tables that support these conclusions.

3.2 Percentage Distributions of Racial/Ethnic Subgroups by Demographic and Socioeconomic Characteristics

Table 3.1 presents the percentage distributions of racial/ethnic subgroups by sociodemographic variables for the total surveyed population aged 12 and older (except for education, marital status, and employment which are restricted to ages 18 and older). Tables 3.2-3.5 present analogous percentage distributions by racial/ethnic subgroup for individuals aged 12 to 17, 18 to 25, 26 to 34, and 35 and older, respectively. The data in these tables show that most sociodemographic differences among racial/ethnic subgroups tend to be similar across age groups, especially in comparisons of ages 18 to 25, 26 to 34, and 35 and older. Therefore, this section focuses primarily on the overall patterns of racial/ethnic differences presented in Table 3.1 and secondarily on deviations from the overall patterns shown in Table 3.2- 3.5.

Table 3.1 shows that geographic distribution is an important factor distinguishing racial/ethnic subgroups. More than 75% of Mexicans, Native Americans, and other Hispanics lived in either the South or the West, 84% of Caribbeans lived in the Northeast, and 70% of Cubans lived in the South. Non-Hispanic whites were distributed more evenly among three or more regions; so to a lesser extent were non-Hispanic blacks, Asian/Pacific Islanders, and South Americans. About three-quarters or more

of Asian/Pacific Islanders and of most Hispanic subgroups (Caribbeans, Central Americans, Cubans, Puerto Ricans, and South Americans) lived in metropolitan areas with population of 1 million or more. Only four subgroups had more than 10% of individuals aged 12 and older living in non-metropolitan areas—other Hispanics (47%), Native Americans (41%), non-Hispanic whites (27%), and non-Hispanic blacks (14%).

Table 3.1 also shows that, among the seven Hispanic subgroups, other Hispanics and Puerto Ricans were the least likely to choose Spanish for the NHSDA interview (5.1% and 7.7% respectively). Central Americans (50%), Cubans (36%), Mexicans (32%), and Caribbeans (28%) were the most likely to complete the interview in Spanish. Table 3.2 shows that the same general pattern arises when the analysis is restricted to adolescents aged 12 to 17. However, within each Hispanic subgroup, the percentage of adolescents who chose to use Spanish was lower than the percentage of adults who chose to use Spanish.

A consistent pattern emerges from the socioeconomic indicators presented in Table 3.1. Non-Hispanic blacks, Native Americans, and several Hispanic groups (particularly Caribbeans, Central Americans, Mexicans, and Puerto Ricans) had relatively low family incomes on average, while Asian/Pacific Islanders, non-Hispanic whites, and Cubans had relatively high family incomes on average. Similarly, non-Hispanic blacks, Native Americans, and the same Hispanic subgroups (Caribbeans, Central Americans, Mexicans, and Puerto Ricans) had relatively high percentages who were unemployed, without health insurance, and living in households in which a member received welfare. The racial/ethnic subgroups in which one-third or more had no health insurance coverage included Central Americans (48%), Mexicans (37%), Caribbeans (35%), and South Americans (34%). The percentage unemployed ranges from a high of about 16% among Native Americans to 6% or less among non-Hispanic whites, Cubans, and Asian/Pacific Islanders. There are even more pronounced racial/ethnic differences in employment status when the analysis is restricted to 18- to 25-year-olds (Table 3.3): About 25% of Native Americans, 19% of Caribbeans, 18% of non-Hispanic blacks, and 16% of Puerto Ricans were unemployed in this age group, as compared with only about 4.7% of Asian/Pacific Islanders and 9.5% of non-Hispanic whites.

The rankings of racial/ethnic subgroups with respect to educational attainment in Table 3.1 are closely similar to their rankings with respect to family income and other socioeconomic indicators. About one-third of Caribbeans, Central Americans, and Mexicans aged 18 and older had eight or fewer years of schooling, as compared with only 4.6% of Asian/Pacific Islanders and 6.4% of non-Hispanic whites. Native Americans also had a relatively small percentage of individuals aged 18 and older who had eight or fewer years of schooling (6.2%). Tables 3.2- 3.5 suggest that racial/ethnic differences in educational attainment do vary somewhat by age group. For example, a comparison of Tables 3.3 and 3.5 indicates that the difference between Asian/Pacific Islanders and non-Hispanic whites in the percentage who had some education beyond high school is much larger among young adults aged 18 to 25 (65% versus 46%) than among adults aged 35 and older (56% versus 45%). Especially among younger birth cohorts, Asian/Pacific Islanders have by far the highest percentage who have had some education beyond high school.

Table 3.1 also shows that the groups with the highest percentages of never-married respondents aged 18 and older were non-Hispanic blacks (32%), Central Americans (30%), and South Americans and Asian/Pacific Islanders (28% each). Even though the distribution of marital status is highly associated with age, the rankings of racial/ethnic subgroups with respect to the percentage of never-married individuals are closely similar in Tables 3.3, 3.4, and 3.5.

In contrast to the marked differences among racial/ethnic subgroups in socioeconomic status measures and educational attainment, Table 3.1 shows relatively small racial/ethnic differences in the percentage of individuals aged 12 and older who lived with one or more of their own children of any age. This percentage ranges from a low of about 42% among Asian/Pacific Islanders to a high of about 50% among Mexicans. The percentage of individuals who live with their own children varies with age for well-known demographic reasons, because most individuals marry and have children in their twenties and thirties and their children leave home, if they do, when they are in their forties and fifties. Yet Tables 3.3 through 3.5 suggest that racial/ethnic differences in the percentage living with children are largely invariant with respect to age. The largest racial/ethnic differences arise in the 35-and-older age group (Table 3.5), where 65% or more of Central Americans, Caribbeans, Mexicans, and South Americans live with at least one of their own children, as compared with only about 41% of non-Hispanic whites. This difference may reflect higher marital fertility among most Hispanic subgroups than among non-Hispanic whites (Harrison and Bennett, 1995). High marital fertility typically means that one or both parents continue to have children during their thirties and early forties so that the parents may be relatively advanced in age when the last child is old enough to live independently. This difference in living with at least one child may also reflect socioeconomic or cultural differences. Children may continue to live with parents into adulthood because of cultural norms about living in multi-generational households, or to minimize living expenses.

In the analysis restricted to adolescents aged 12 to 17 (Table 3.2), Native Americans (7.9%), other Hispanics (5.8%), Central Americans (5.1%) and Mexicans (4.8%) had the highest percentage who had dropped out of school. Native Americans (65%), non-Hispanic blacks (64%), and Caribbeans (59%) had the highest percentages living with fewer than two parents. The rankings of racial/ethnic subgroups with respect to the percentages of adolescents who dropped out of school and the percentages who lived with fewer than two parents are similar to their rankings with respect to the measures of socioeconomic status and educational attainment.

Table 3.1 Percentage Distribution of Racial/Ethnic Groups by Sociodemographic Variables. Respondents Aged 12 and Older, 1991-1993.

	Total	Native American	Asian/ Pacific Islander	Hispanic: Caribbean	Hispanic: Central American	Hispanic: Cuban	Hispanic: Mexican	Hispanic: Puerto Rican	Hispanic: South American	Hispanic: other	Non-Hispanic blacks	Non-Hispanic whites
Age												
12-17	10.1	12.4	11.4	15.1	11.7	6.4	15.4	14.2	11.8	11.1	13.5	9.1
18-25	13.8	15.6	16.4	16.4	22.1	10.2	21.1	15.3	18.0	10.4	16.6	12.7
26-34	18.5	17.8	20.2	25.8	29.4	17.2	24.7	21.0	23.4	19.5	19.8	17.7
35+	57.6	54.2	51.9	42.6	36.8	66.2	38.7	49.5	46.8	58.9	50.1	60.5
Gender												
Male	48.0	45.6	47.8	46.4	43.7	46.5	52.4	46.0	49.8	46.4	45.1	48.2
Female	52.0	54.4	52.2	53.6	56.3	53.5	47.6	54.0	50.2	53.6	54.9	51.8
Region												
Northeast	20.3	9.8	19.1	83.6	19.2	19.5	1.6	63.8	36.8	6.9	18.3	21.0
North Central	23.8	11.7	13.0	1.0	3.5	3.1	9.5	11.2	6.0	5.9	19.8	26.5
South	35.4	42.5	16.8	13.9	27.8	70.3	31.4	17.2	30.8	16.6	52.8	34.1
West	20.4	36.0	51.2	1.4	49.5	7.1	57.6	7.7	26.4	70.7	9.1	18.3
Population Density												
MSA >1million	44.2	29.3	74.2	88.6	89.1	84.9	61.9	75.5	79.0	31.2	59.2	38.5
Other MSA	32.6	29.2	21.5	9.8	9.0	11.4	29.6	20.1	15.5	22.2	26.8	34.7
Not in MSA	23.3	41.4	4.2	1.6	1.9	3.6	8.5	4.4	5.4	46.6	14.0	26.8
Interview												
Spanish	2.3	0.0	0.0	28.1	50.1	36.4	31.7	7.7	21.1	5.1	0.0	0.0
English	97.7	100.0	100.0	71.9	49.9	63.6	68.3	92.3	78.9	94.9	100.0	100.0
Family Income												
<$20,000	33.0	42.4	22.5	52.6	48.6	32.8	47.4	46.2	40.2	40.3	49.4	29.6
$20-40,000	17.8	19.8	16.8	22.7	21.1	19.7	19.4	17.8	18.7	21.1	18.6	17.5
>$40,000	49.3	37.8	60.6	24.8	30.3	47.5	33.3	35.9	41.1	38.5	32.0	53.0
Education(1)												
0-8 years	8.3	6.2	4.6	29.2	33.4	19.8	33.1	14.6	10.4	15.4	9.2	6.4
9-11 years	13.8	19.7	7.7	21.4	17.8	12.0	20.0	26.9	10.5	17.9	20.2	12.5
High school grad	33.9	31.4	26.9	29.9	23.3	30.8	23.7	30.4	34.3	33.8	37.0	34.4
> High school	44.0	42.8	60.9	19.5	25.5	37.3	23.2	28.2	44.7	32.9	33.6	46.7

Table 3.1 Percentage Distribution of Racial/Ethnic Groups by Sociodemographic Variables. Respondents Aged 12 and Older, 1991-1993. (continued)

	Total	Native American	Asian/ Pacific Islander	Hispanic: Caribbean	Hispanic: Central American	Hispanic: Cuban	Hispanic: Mexican	Hispanic: Puerto Rican	Hispanic: South American	Hispanic: other	Non-Hispanic blacks	Non-Hispanic whites
Marital Status(1)												
Married	61.8	58.4	60.9	54.7	58.5	63.9	61.3	52.8	57.6	63.4	41.6	64.8
Widowed/div/sep.	18.1	24.9	10.8	21.3	12.0	18.3	14.0	21.5	14.2	18.0	26.1	17.4
Never married	20.2	16.7	28.4	24.0	29.5	17.8	24.7	25.7	28.2	18.5	32.4	17.8
Employment (1)												
Employed	63.2	60.7	70.8	57.2	67.8	67.2	66.4	59.3	64.2	60.1	60.2	63.2
Unemployed	6.0	15.5	5.8	11.7	9.7	5.5	8.8	10.0	10.0	7.8	11.4	5.0
Not in labor force	30.8	23.8	23.4	31.1	22.5	27.4	24.8	30.7	25.8	32.1	28.4	31.9
Own Children												
None	61.5	51.0	58.5	47.7	46.5	54.3	49.8	52.1	54.3	55.3	58.5	63.1
1 or more	38.5	49.0	41.5	52.3	53.5	45.7	50.2	47.9	45.7	44.7	41.5	36.9
Welfare Receipt												
Yes	5.0	15.4	5.6	20.3	5.4	6.2	8.0	18.1	6.0	6.8	14.0	3.1
No	95.0	84.5	94.4	79.7	94.6	93.8	92.0	81.9	94.0	93.2	86.0	96.9
Insurance Coverage												
Yes	85.7	69.0	83.2	64.5	52.2	77.2	63.4	79.9	66.0	81.0	81.7	88.5
No	14.3	31.0	16.8	35.5	47.8	22.8	36.6	20.1	34.0	19.0	18.3	11.5
Mean Number of People in Household	3.2	3.4	3.8	3.9	4.5	3.4	4.5	3.7	3.6	3.4	3.5	3.0

1 Percentages for education, employment, and marital status are calculated using respondents aged 18 or older.

Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table 3.2 Percentage Distribution of Racial/Ethnic Groups by Sociodemographic Variables. Respondents Aged 12-17, 1991-1993.

	Total	Native American	Asian/ Pacific Islander	Hispanic: Caribbean	Hispanic: Central American	Hispanic: Cuban	Hispanic: Mexican	Hispanic: Puerto Rican	Hispanic: South American	Hispanic: other	Non-Hispanic blacks	Non-Hispanic whites
Gender												
Male	51.2	44.7	53.0	49.8	46.8	44.8	51.6	52.4	47.5	49.9	50.6	51.3
Female	48.8	55.3	47.0	50.2	53.2	55.2	48.4	47.6	52.5	50.1	49.4	48.7
Region												
Northeast	18.2	7.9	17.6	92.0	16.2	20.1	1.0	66.8	34.2	9.7	17.7	18.6
North Central	25.1	15.5	13.8	*	5.5	7.0	11.5	11.9	7.5	1.8	20.1	29.2
South	36.5	37.6	19.0	6.1	30.2	63.6	33.4	13.9	37.7	15.0	52.9	34.9
West	20.2	38.9	49.6	1.5	48.1	9.2	54.1	7.4	20.7	73.5	9.3	17.2
Population Density												
MSA >1million	41.3	28.4	66.0	85.0	86.8	80.4	58.0	70.4	74.2	34.1	55.5	33.6
Other MSA	33.8	28.7	29.4	15.0	9.3	17.2	30.6	25.7	18.6	16.9	29.5	36.2
Not in MSA	24.9	42.9	4.6	0.0	3.8	2.4	11.3	3.9	7.2	49.0	15.0	30.2
Interview												
Spanish	1.3	0.0	0.0	16.1	22.1	10.6	12.8	2.7	8.5	2.3	0.0	0.0
English	98.7	100.0	100.0	83.9	77.9	89.4	87.2	97.3	91.5	97.7	100.0	100.0
Family Income												
<$20,000	31.3	45.7	25.7	59.3	55.8	39.6	48.1	54.0	36.8	41.4	55.0	23.5
$20-40,000	19.1	16.3	18.6	22.8	16.8	22.9	20.8	19.8	24.5	23.4	20.5	18.6
>$40,000	49.6	38.0	55.7	17.8	27.4	37.5	31.2	26.2	38.6	35.2	24.5	58.0
School Dropout												
Yes	2.3	7.9	1.5	2.2	5.1	3.0	4.8	2.5	1.7	5.8	2.4	2.0
No	97.7	92.1	98.5	97.8	94.9	97.0	95.2	97.5	98.3	94.2	97.6	98.0
Family												
Mother/Father	61.2	34.6	77.5	40.9	57.8	56.9	63.5	49.2	52.8	69.4	35.5	66.3
Other	38.8	65.4	22.5	59.1	42.2	43.1	36.5	50.8	47.2	30.6	64.5	33.7
Welfare Receipt												
Yes	9.1	18.3	11.3	29.7	6.6	13.1	12.9	31.6	7.2	7.5	23.1	4.8
No	90.9	81.7	88.7	70.3	93.4	86.9	87.1	68.4	92.8	92.5	76.9	95.2
Insurance Coverage												
Yes	85.2	76.2	87.3	69.7	59.3	75.3	63.5	84.8	75.6	79.8	81.8	88.7
No	14.8	23.8	12.7	30.3	40.7	24.7	36.5	15.2	24.4	20.2	18.2	11.3
Mean Number of People in Household	4.5	4.7	5.0	4.7	5.1	4.2	5.5	4.6	4.3	4.4	4.6	4.3

* Low precision.

Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table 3.3 Percentage Distribution of Racial/Ethnic Groups by Sociodemographic Variables. Respondents Aged 18-25, 1991-1993.

	Total	Native American	Asian/ Pacific Islander	Hispanic: Caribbean	Hispanic: Central American	Hispanic: Cuban	Hispanic: Mexican	Hispanic: Puerto Rican	Hispanic: South American	Hispanic: other	Non-Hispanic blacks	Non-Hispanic whites
Gender												
Male	49.2	47.7	50.5	56.5	52.3	58.0	51.5	47.1	54.3	46.2	46.3	49.4
Female	50.8	52.3	49.5	43.5	47.7	42.0	48.5	52.9	45.7	53.8	53.7	50.6
Region												
Northeast	19.4	2.4	20.8	83.3	16.5	11.9	2.4	68.3	37.6	8.3	17.6	20.4
North Central	21.5	19.6	15.4	0.5*	2.9	2.7	9.5	10.7	6.1	8.6	19.3	24.3
South	37.9	50.7	17.0	14.3	29.3	75.6	30.0	16.1	33.0	16.1	53.7	37.2
West	21.2	27.3	46.8	1.9	51.3	9.7	58.1	4.9	23.3	67.1	9.3	18.1
Population Density												
MSA >1million	44.1	26.6	66.9	78.1	90.2	87.1	65.4	71.8	77.3	39.8	56.5	36.7
Other MSA	32.8	25.1	26.6	18.0	9.5	10.4	26.6	22.1	17.0	21.5	28.8	35.4
Not in MSA	23.1	48.4	6.5	3.9	*	2.5	8.0	6.1	5.7	38.7	14.7	27.8
Interview												
Spanish	3.0	0.0	0.0	19.9	47.6	18.6	29.6	3.7	13.3	2.7	0.0	0.1
English	97.0	100.0	100.0	80.1	52.4	81.4	70.4	96.3	86.7	97.3	100.0	99.9
Family Income												
<$20,000	45.8	59.6	40.8	65.5	49.9	32.4	51.6	51.4	46.6	51.8	54.2	43.6
$20-40,000	16.8	17.1	13.8	10.1	20.3	21.7	20.2	16.5	17.5	19.7	18.5	16.2
>$40,000	37.4	23.3	45.4	24.4	29.8	45.9	28.2	32.1	35.9	28.5	27.2	40.2
Education												
0-8 Years	2.8	0.0	*	*	30.0	4.5	17.2	2.7	3.4	2.8	*	1.4
9-11 Years	18.5	17.8	12.1	40.0	22.1	19.7	30.3	32.8	19.1	19.2	24.2	16.1
High school grad	36.2	49.4	22.1	34.0	27.6	39.9	29.6	40.0	31.5	46.2	43.6	36.1
> High school	42.5	32.9	65.0	25.7	20.3	35.9	22.9	24.5	46.0	31.8	31.5	46.4
Marital Status												
Married	23.3	19.9	11.2	18.9	33.0	18.0	31.8	17.9	19.4	26.8	12.2	25.1
Widowed/div/sep.	3.8	9.5	*	2.7	3.0	3.3	4.9	3.2	*	4.6	3.5	3.9
Never married	72.9	70.6	88.1	78.4	64.0	78.7	63.3	78.9	80.0	68.7	84.3	71.0
Employment												
Employed	65.3	57.2	52.4	41.7	65.6	73.1	65.5	54.3	61.8	66.5	54.5	68.1
Unemployed	10.8	25.1	4.7	18.7	9.4	10.8	11.4	16.3	10.2	8.6	18.3	9.5
Not in labor force	24.0	17.7	42.9	39.5	25.0	16.1	23.1	29.4	28.0	24.9	27.2	22.4
Own Children												
None	78.2	75.0	93.6	78.3	66.5	88.9	65.3	74.9	84.1	70.9	69.5	80.7
1 or more	21.8	25.0	6.4	21.7	33.5	11.1	34.7	25.1	15.9	29.1	30.5	19.3

Table 3.3 Percentage Distribution of Racial/Ethnic Groups by Sociodemographic Variables. Respondents Aged 18-25, 1991-1993. (continued)

	Total	Native American	Asian/ Pacific Islander	Hispanic: Caribbean	Hispanic: Central American	Hispanic: Cuban	Hispanic: Mexican	Hispanic: Puerto Rican	Hispanic: South American	Hispanic: other	Non-Hispanic blacks	Non-Hispanic whites
Welfare Receipt												
Yes	8.5	11.3	8.6	23.2	4.1	4.3	8.9	21.7	3.1	11.4	20.7	5.9
No	91.5	88.7	91.4	76.8	95.9	95.7	91.1	78.3	96.9	88.6	79.3	94.1
Insurance Coverage												
Yes	73.1	52.4	70.6	48.6	45.8	62.3	50.7	69.0	57.8	71.2	70.8	76.9
No	26.9	47.6	29.4	51.4	54.2	37.7	49.3	31.0	42.2	28.8	29.2	23.1
Mean Number of People in Household	3.4	3.2	3.7	3.9	4.6	3.8	4.7	3.8	3.7	3.7	3.7	3.2

* Low precision.

Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table 3.4 Percentage Distribution of Racial/Ethnic Groups by Sociodemographic Variables. Respondents Aged 26-34, 1991-1993.

	Total	Native American	Asian/ Pacific Islander	Hispanic: Caribbean	Hispanic: Central American	Hispanic: Cuban	Hispanic: Mexican	Hispanic: Puerto Rican	Hispanic: South American	Hispanic: other	Non-Hispanic blacks	Non-Hispanic whites
Gender												
Male	49.3	33.7	49.7	49.6	45.4	48.9	54.8	53.0	49.9	39.1	44.8	49.6
Female	50.7	66.3	50.3	50.4	54.6	51.1	45.2	47.0	50.1	60.9	55.2	50.4
Region												
Northeast	19.9	4.3	26.1	85.0	18.6	19.2	1.4	62.6	42.0	11.4	17.5	20.7
North Central	23.3	13.4	8.2	1.5	2.5	3.4	8.4	10.5	3.3	7.4	19.4	26.8
South	34.9	45.6	19.0	10.8	29.4	69.4	30.7	17.4	33.2	11.0	52.6	33.5
West	21.9	36.7	46.7	2.7	49.4	7.9	59.6	9.6	21.5	70.2	10.5	19.0
Population Density												
MSA >1million	47.8	28.3	77.4	90.3	89.3	91.6	63.3	71.3	86.9	36.1	62.5	41.3
Other MSA	31.9	30.2	19.0	7.6	9.0	8.4	28.5	23.8	12.9	21.1	25.5	34.7
Not in MSA	20.3	41.6	3.6	2.0	1.7	0.0	8.2	5.0	*	42.8	12.0	24.0
Interview												
Spanish	3.3	0.0	0.0	20.7	53.7	21.1	37.4	7.5	15.4	3.6	0.0	0.0
English	96.7	100.0	100.0	79.3	46.3	78.9	62.6	92.5	84.6	96.4	100.0	100.0
Family Income												
<$20,000	27.9	66.6	23.8	50.7	47.9	24.6	45.5	45.2	31.9	32.8	44.2	23.2
$20-40,000	20.0	6.9	15.1	23.0	23.5	11.6	19.7	17.4	24.6	20.6	20.1	20.2
>$40,000	52.1	26.5	61.1	26.2	28.7	63.8	34.9	37.3	43.5	46.6	35.6	56.7
Education												
0-8 Years	3.5	3.2	2.4	18.2	26.2	2.3	27.9	4.4	3.6	3.8	1.5	1.4
9-11 Years	11.2	18.7	4.4	17.0	18.9	10.8	20.1	22.9	7.9	10.0	16.1	9.6
High school grad	34.7	36.7	22.1	34.5	27.3	31.1	27.3	38.7	37.9	43.0	40.6	34.8
> High school	50.7	41.5	71.1	30.2	27.6	55.8	24.8	34.0	50.6	43.2	41.8	54.2
Marital Status												
Married	62.9	62.8	56.7	59.4	67.3	60.2	69.2	57.2	61.1	61.2	42.7	66.0
Widowed/div/sep.	11.9	22.7	4.2	20.4	7.5	13.0	9.4	15.3	11.7	11.4	17.0	11.5
Never married	25.2	14.5	39.1	20.2	25.3	26.8	21.3	27.6	27.2	27.4	40.3	22.5
Employment												
Employed	77.7	56.9	77.3	65.5	71.3	84.5	73.6	66.1	74.1	66.9	71.4	79.5
Unemployed	7.6	14.3	4.7	10.6	5.7	5.6	8.5	13.9	10.6	13.1	14.6	6.3
Not in labor force	14.7	28.8	18.0	23.9	23.0	9.9	17.9	20.0	15.2	20.0	14.0	14.1
Own Children												
None	43.4	28.7	57.8	32.5	34.5	52.6	29.6	37.5	45.7	41.3	40.8	44.6
1 or more	56.6	71.3	42.2	67.5	65.5	47.4	70.4	62.5	54.3	58.7	59.2	55.4

Table 3.4 Percentage Distribution of Racial/Ethnic Groups by Sociodemographic Variables. Respondents Aged 26-34, 1991-1993. (continued)

	Total	Native American	Asian/ Pacific Islander	Hispanic: Caribbean	Hispanic: Central American	Hispanic: Cuban	Hispanic: Mexican	Hispanic: Puerto Rican	Hispanic: South American	Hispanic: other	Non-Hispanic blacks	Non-Hispanic whites
Welfare Receipt												
Yes	6.2	28.5	5.4	20.1	7.3	4.5	7.5	19.1	8.7	8.8	15.2	4.1
No	93.8	71.5	94.6	79.9	92.7	95.5	92.5	80.9	91.3	91.2	84.8	95.9
Insurance Coverage												
Yes	81.8	72.7	85.2	58.7	52.7	78.3	61.3	75.9	73.0	69.9	78.2	83.9
No	18.9	27.3	14.8	41.3	47.3	21.7	38.7	24.1	27.0	30.1	21.8	16.1
Mean Number of People in Household	3.4	3.8	3.6	3.7	4.5	3.4	4.5	3.6	3.4	3.5	3.6	3.2

* Low precision.

Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table 3.5 Percentage Distribution of Racial/Ethnic Groups by Sociodemographic Variables. Respondents Aged 35 and Older, 1991-1993.

	Total	Native American	Asian/ Pacific Islander	Hispanic: Caribbean	Hispanic: Central American	Hispanic: Cuban	Hispanic: Mexican	Hispanic: Puerto Rican	Hispanic: South American	Hispanic: other	Non-Hispanic blacks	Non-Hispanic whites
Gender												
Male	46.7	49.1	45.1	39.2	36.1	44.2	51.8	40.9	48.6	48.2	43.4	47.1
Female	53.3	50.9	54.9	60.8	63.9	55.8	48.2	59.1	51.4	51.8	56.6	52.9
Region												
Northeast	21.0	14.1	16.2	80.0	22.4	20.6	1.5	62.1	34.5	4.6	19.0	21.6
North Central	24.4	8.0	13.9	1.2	3.9	2.7	9.3	11.6	6.9	5.7	19.9	26.5
South	34.8	40.2	15.3	18.4	24.8	70.4	31.8	18.5	27.1	18.8	52.5	33.5
West	19.8	37.6	54.6	*	49.0	6.3	57.3	7.9	31.6	70.9	8.5	18.3
Population Density												
MSA >1million	43.6	30.6	77.1	92.9	89.1	83.3	60.7	79.9	77.0	27.5	59.8	38.8
Other MSA	32.5	30.3	19.2	6.2	8.6	11.8	31.5	16.4	15.5	23.6	25.9	34.4
Not in MSA	24.0	39.1	3.7	*	2.3	4.9	7.8	3.8	7.5	48.9	14.3	26.8
Interview												
Spanish	2.0	0.0	0.1	40.1	57.7	45.7	36.7	10.5	30.1	6.5	0.0	0.0
English	98.0	100.0	99.9	59.9	42.3	54.3	63.3	89.5	69.9	93.5	100.0	100.0
Family Income												
<$20,000	31.8	28.9	15.6	46.3	46.2	34.3	45.9	42.8	42.8	40.6	48.3	29.4
$20-40,000	17.1	25.6	18.1	27.2	21.0	21.2	18.2	17.9	14.6	21.2	17.5	16.8
>$40,000	51.1	45.6	66.3	26.4	32.7	44.4	35.8	39.3	42.6	38.2	34.2	53.8
Education												
0-8 Years	11.2	9.0	6.6	47.0	41.2	26.7	45.1	22.5	16.5	21.5	15.1	8.9
9-11 Years	13.5	20.5	7.6	16.9	14.5	11.2	14.3	26.7	8.6	20.3	20.5	12.6
High school grad	33.1	24.5	30.2	25.6	17.4	29.3	18.2	23.9	33.6	28.5	33.4	34.0
> High school	42.3	46.0	55.6	10.5	26.9	32.8	22.4	26.9	41.2	29.7	31.0	44.5
Marital Status												
Married	70.6	68.0	78.2	65.6	66.9	71.9	72.3	61.7	70.6	70.7	50.9	72.9
Widowed/div/sep.	23.4	30.1	16.5	29.0	21.0	22.0	22.0	29.8	20.7	22.6	37.1	22.0
Never married	6.0	1.9	5.3	5.4	12.1	6.1	5.7	8.5	8.7	6.7	12.0	5.2
Employment												
Employed	58.0	62.9	74.1	58.2	66.3	61.7	62.3	58.0	60.2	56.8	57.7	57.3
Unemployed	4.3	13.1	6.5	9.6	13.0	4.6	7.6	6.3	9.6	5.9	7.8	3.6
Not in labor force	37.7	24.0	19.4	32.3	20.6	33.6	30.0	35.6	30.2	37.3	34.5	39.1
Own Children												
None	56.7	42.0	38.5	27.7	27.0	45.0	35.0	37.7	35.2	48.9	51.3	59.5
1 or more	43.3	58.0	61.5	72.3	73.0	55.0	65.0	62.3	64.8	51.1	48.7	40.5

Table 3.5 Percentage Distribution of Racial/Ethnic Groups by Sociodemographic Variables. Respondents Aged 35 and Older, 1991-1993 (continued)

	Total	Native American	Asian/ Pacific Islander	Hispanic: Caribbean	Hispanic: Central American	Hispanic: Cuban	Hispanic: Mexican	Hispanic: Puerto Rican	Hispanic: South American	Hispanic: other	Non-Hispanic blacks	Non-Hispanic whites
Welfare Receipt												
Yes	3.1	11.7	3.6	16.0	4.3	6.2	5.8	12.8	5.5	5.1	8.9	2.0
No	96.9	88.3	96.4	84.0	95.7	93.8	94.2	87.2	94.5	94.9	91.1	98.0
Insurance Coverage												
Yes	90.2	71.0	85.6	72.2	53.3	79.4	71.7	83.5	63.2	86.6	86.6	92.2
No	9.8	29.0	14.4	27.8	46.7	20.6	28.3	16.5	36.8	13.4	13.4	7.8
Mean Number of People in Household	2.8	3.0	3.7	3.8	4.3	3.2	4.1	3.4	3.4	3.1	3.0	2.7

* Low precision.

Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Chapter 4 Prevalence of Substance Use by Race/Ethnicity, Age, and Gender

4.1 Introduction

This chapter compares individuals in eleven racial/ethnic subgroups (see Chapter 2) with respect to prevalences of cigarette, alcohol, marijuana, cocaine, and any illicit drug use during the past year, need for illicit drug abuse treatment, alcohol dependence, heavy smoking (a pack of cigarettes or more a day), and heavy drinking (five or more drinks per occasion on 5 or more days in the past 30 days). We first describe racial/ethnic differences in the total combined 1991-93 NHSDA sample and then analyze the racial/ethnic differences within subclasses defined by gender and age (age groups 12 to 17, 18 to 24, 25 to 34, and 35 and older).

The main conclusions of this chapter are as follows:

- **Cigarette use.** Compared with other racial/ethnic subgroups of the U.S. household population aged 12 and over, Native Americans (53%), Puerto Ricans (33%), and non-Hispanic whites (32%) had a relatively high prevalence of past-year cigarette smoking. Asian/Pacific Islanders (22%) had a relatively low prevalence, as did Caribbeans (21%) and Central Americans (18%). Cubans, Mexicans, South Americans, other Hispanics, and non-Hispanic blacks are intermediate. The ranking of subgroups with respect to past-month heavy cigarette smoking is similar.

- **Illicit drug use and need for illicit drug abuse treatment.** The rankings of racial/ethnic subgroups with respect to past-year illicit drug use (including use of marijuana and cocaine) and need for illicit drug abuse treatment are similar, but not identical, to their rankings with respect to past-year cigarette use and past-month heavy cigarette use. A relatively high prevalence was found among Native Americans (20% used an illicit drug in the past year), Mexicans (13%), Puerto Ricans (13%), and non-Hispanic blacks (13%). A relatively low prevalence was found among Asian/Pacific Islanders (6.5%), Caribbeans (7.6%), Central Americans (5.7%), and Cubans (8.2%). The prevalence was intermediate among South Americans, other Hispanics, and non-Hispanic whites.

- **Alcohol use and dependence on alcohol.** South Americans (74%) and non-Hispanic whites (69%) are relatively likely to have used alcohol in the past year. In contrast, Asian/Pacific Islanders are relatively unlikely to have done so (53%), as are Central Americans (51%), Puerto Ricans (60%), and non-Hispanic blacks (55%). The rankings of the subgroups with respect to past-month heavy alcohol use and alcohol dependence are similar to each other, but somewhat different from their rankings with respect to past-year alcohol use. Specifically, the prevalence of dependence on alcohol was relatively high among Native Americans (5.6%) and Mexicans (5.6%), and relatively low among Asian/Pacific Islanders (1.8%), Caribbeans (1.9%), and Cubans (0.9%). The prevalence of heavy alcohol use was relatively high among Mexicans (6.9%) and non-Hispanic whites (5.3%), while Asian/Pacific Islanders (0.9%), Caribbeans

(2.5%), Central Americans (2.2%), Cubans (2.8%), and South Americans (3.0%) were relatively low.

- **Gender differences.** Differences between males and females are generally similar across racial/ethnic subgroups for substance use, alcohol dependence, and need for illicit drug abuse treatment. With the possible exception of Native Americans (no significant differences between males and females), males in each of the eleven subgroups are more likely than females in the same subgroup to use substances, to be dependent on alcohol, and to need illicit drug abuse treatment. Gender differences in heavy alcohol use and in alcohol dependence are especially large, with males in the total surveyed population more than twice as likely as females to be dependent on alcohol in the total surveyed population (4.9% versus 2.1%). Gender differences in both heavy alcohol use and alcohol dependence are larger among Mexicans than among other racial/ethnic subgroups. Also, for Cubans and Asian/Pacific Islanders, males were three times as likely as females to report smoking a pack or more of cigarettes per day.

- **Age patterns.** Age patterns of substance use, dependence on alcohol, and need for illicit drug abuse treatment are generally similar across the eleven racial/ethnic subgroups, with the possible exception of Native Americans (insufficient data). Each of the measures analyzed in this chapter rises to a peak prevalence among 18- to 25-year-olds and then declines, with the exception of heavy cigarette use, which peaks in the 26 to 34 age group. Unlike other measures, cigarette and alcohol use, especially heavy smoking (15% at ages 35 and older), persist at relatively high levels among individuals aged 35 and older. Relative to the total surveyed population, non-Hispanic blacks have low prevalences of use of cigarettes, marijuana, and cocaine at ages 12 to 17, and high prevalences of use of these substances at ages 35 and older. The age patterns reported in this chapter may reflect differences among individuals born during different historical periods (i.e., birth cohort effects) as well as the effects of aging.

The remaining sections of this chapter discuss these findings in detail.

4.2 Patterns of Specific Substance Use

Table 4.1 presents the estimated percentages of individuals in the eleven racial/ethnic subgroups who responded affirmatively to each of nine measures of substance use, dependence, and need for treatment (see section 2.1). In the total surveyed population aged 12 and older in 1991 through 1993, about 31% used cigarettes in the past year, 66% used alcohol, 12% used any illicit drug, 9.0% used marijuana, and 2.5% used cocaine. About 2.7% of the total surveyed population were in need of illicit drug abuse treatment, 3.5% were dependent on alcohol, 14% smoked heavily in the past month, and 5.1% drank alcohol heavily in the past month.

Some racial/ethnic subgroups deviate markedly from the substance use patterns of the total surveyed population. Table 4.1 suggests that Native Americans are the highest of the eleven subgroups on six of the nine measures—past-year cigarette use (53%), past-year use of any illicit drug use (20%),

past-year marijuana use (15%), past-year cocaine use (5.2%), need for illicit drug abuse treatment (7.8%), and heavy past-month cigarette use (24%). However, given the small sample size of Native Americans (n = 411), the difference between Native Americans and the next highest subgroup is statistically significant for only one of these six measures: past-year cigarette use. (The statistical test results reported in Chapters 4 and 5 are based on two-tail differences-of-proportions tests at the standard .05 significance level; see Appendix A for details.) In general, the small Native American sample size often implies that differences between Native Americans and other subgroups are *not* statistically significant in this report, even when the differences are substantial in magnitude. Thus, we urge caution in interpreting differences between Native Americans and other subgroups presented in Table 4.1 and in subsequent tables of this chapter.

Nevertheless, the differences between Native Americans and other subgroups are sufficiently large to establish Native Americans as *one* of the highest subgroups with respect to each of the nine measures, except past-year alcohol use (64% of Native Americans versus 66% of the total population), and past-month heavy alcohol use (4.6% versus 5.1%). For example, with respect to past-year marijuana use, Native Americans (15%) are significantly higher than Asian/Pacific Islanders (4.7%), Caribbeans (5.6%), Central Americans (2.7%), Cubans (5.9%), South Americans (8.4%), and non-Hispanic whites (8.9%).

Mexicans are significantly higher in alcohol dependence (5.6%) and past-month heavy drinking (6.9%) than any other subgroup, except Native Americans (5.6% and 4.6%, respectively). Mexicans are also relatively high in past-year cocaine use (3.9% versus 2.5% in the total target population), and need for illicit drug abuse treatment (3.6% versus 2.5% in the total target population). However, Mexicans are not appreciably higher than other Americans on other measures. For example, Mexicans are about as likely as the total surveyed population to have used any alcohol in the past year (64% versus 66% in the total target population).

Other subgroups are relatively high on particular measures. Non-Hispanic whites and South Americans are relatively high on measures of licit substance use, (both past-year and heavy measures of cigarette and alcohol use for non-Hispanic whites, and past-year alcohol use for South Americans). Puerto Ricans and non-Hispanic blacks are relatively high on several measures of illicit substance use (for Puerto Ricans they are any illicit drug use, marijuana and cocaine use in the past year, and need for illicit drug abuse treatment), (for non-Hispanic blacks they are any illicit drug use, marijuana use, and need for illicit drug abuse treatment).

Four racial/ethnic subgroups are relatively low on all nine measures of substance use, dependence, and need for treatment: Asian/Pacific Islanders, Caribbeans, Central Americans, and Cubans. Central Americans are the lowest of all eleven subgroups on seven of the nine measures, all except alcohol dependence and heavy alcohol use. Cubans are the lowest in alcohol dependence (0.9% versus 3.5% in the total surveyed population). Asian/Pacific Islanders are lowest in heavy alcohol use (0.9% versus 5.1% in the total surveyed population).

4.3 Cigarettes

Table 4.2 presents the estimated percentages of individuals in the eleven racial/ethnic subgroups who reported using cigarettes in the past year by gender and age. In the total surveyed population (first row of Table 4.2), males were nearly 20% more likely than females to have used cigarettes in the past year (34% versus 28%). Overall, past-year cigarette use increased with age to a peak prevalence of about 40% among individuals aged 18 to 25 before declining to about 29% among individuals aged 35 and older.

In Table 4.2 and in subsequent tables of this chapter, there are a number of possible explanations of the age pattern of prevalence estimates, which include differences among individuals born during different periods of history (i.e., birth cohort effects) as well as effects of aging. Strong assumptions are often required to analytically separate the effects of cohort, age, and historical period in analyses of cross-sectional data (Johnson, 1985). This report does not attempt to analytically separate these different effects.

Gender and age patterns of cigarette use within racial/ethnic subgroups are generally similar to the corresponding patterns in the total surveyed population, but there are exceptions. The gender difference in past-year cigarette use is relatively large among Asian/Pacific Islanders (14% of females versus 30% of males), and among most Hispanic groups (e.g., 22% of Mexican females versus 36% of Mexican males). On the other hand, males and females are not significantly different among Caribbeans (21% versus 22%) and other Hispanics (25% versus 27%). Among Caribbeans, Central Americans, Cubans, and non-Hispanic blacks, past-year cigarette smoking attains its peak prevalence relatively late in the life cycle, at ages 26 to 34 rather than at ages 18 to 25.

Despite some distinctive age patterns of substance use within racial/ethnic subgroups, the ranking of subgroups by prevalence of past-year smoking is largely the same within each of the age groups 12 to 17, 18 to 25, 26 to 34, and 35 and older. Native Americans, Puerto Ricans, and non-Hispanic whites have relatively high prevalence at every age, while Asian/Pacific Islanders, Caribbeans, and Central Americans have relatively low prevalence at every age. The main exception is non-Hispanic blacks, who are among the lowest subgroups in smoking at ages 12 to 17 (9.3%) and among the highest at ages 35 and older (34%). Based on the University of Michigan's Monitoring the Future survey, the age pattern of cigarette use among non-Hispanic blacks is better interpreted as a birth cohort effect than as an effect of aging. This is because the prevalence of cigarette smoking among black high school students consistently declined between about 1981 and 1992 (Johnston et al., 1995).

4.4 Alcohol

Table 4.3 presents the estimated percentages of individuals in the eleven racial/ethnic subgroups who reported using alcohol in the past year, by gender and age. In the total surveyed population (first row of Table 4.3), males were about 15% more likely than females to have used alcohol in the past year (71% versus 62%). Past-year alcohol use increased with age to a peak prevalence of about 80% among individuals aged 18 to 34, before declining to about 64% among individuals aged 35 and older.

In every racial/ethnic subgroup except Native Americans, males were significantly more likely than females to use alcohol. The significant gender differences range from a low of about 8 percentage points

among non-Hispanic whites (73% of males versus 65% of females) to a high of about 24 percentage points among Caribbeans, Central Americans, and Mexicans. Age patterns of alcohol use were also similar across subgroups: without exception, prevalence is substantially higher at ages 18 to 25 and 26 to 34 than at ages 12 to 17 and 35 and older. Some subgroups attain their peak prevalence at ages 18 to 25 (Asian/Pacific Islanders, other Hispanics), while others attain their peak prevalence at ages 26 to 34 (Caribbeans, Central Americans, Cubans, Puerto Ricans). However, in every subgroup, prevalence at ages 26 to 34 is no more than 20% higher or lower than prevalence at ages 18 to 25. Thus, the percentage using alcohol in the past year is roughly constant between the end of adolescence and the beginning of middle age. Regardless of age group, South Americans and non-Hispanic whites are relatively high in past-year alcohol use, while Asian/Pacific Islanders, Central Americans, Puerto Ricans, and non-Hispanic blacks are relatively low.

4.5 Any Illicit Drug

Table 4.4 presents the estimated percentages of individuals in the eleven racial/ethnic subgroups who reported using any illicit drug in the past year, by gender and age. In the total surveyed population (first row of Table 4.4), males were about 40% more likely than females to have used any illicit drug in the past year (14% versus 10%). Past-year use of any illicit drug increased with age to a peak prevalence of about 27% among 18- to 25-year-olds before declining to about 6% among individuals aged 35 and older.

In every racial/ethnic subgroup, males were more likely than females to have used illicit drugs in the past year, except among Native Americans, Caribbeans, and other Hispanics, three subgroups with no significant difference between males and females. The significant gender differences range from a low of about 4 percentage points among non-Hispanic whites (14% of males versus 10% of females), to a high of about 9 percentage points among Puerto Ricans and South Americans.

In the total surveyed population, Mexicans, Puerto Ricans, and non-Hispanic blacks were relatively high in past-year illicit drug use (around 13%), while Asian/Pacific Islanders, Caribbeans, Central Americans, and Cubans were relatively low (5.7% to 8.2). Native Americans were relatively high at ages 12 to 17 (23%) and 26 to 34 (34%), but data for Native Americans are too sparse to provide reliable estimates at ages 18 to 25 and 35 and older. Other Hispanics have a fairly distinctive age pattern of past-year illicit drug prevalence: relatively high at ages 25 and younger (17% at ages 12 to 17, versus 13% in the total population), and relatively low at ages 35 and older (3.0% at ages 35 and older, versus 5.9% in the total population).

4.6 Marijuana

Table 4.5 presents the estimated percentages of individuals in the eleven racial/ethnic subgroups who reported using marijuana in the past year, by gender and age. In the total surveyed population (first row of Table 4.5), males were about 70% more likely than females to have used marijuana in the past year (11% versus 6.7%). Past-year use of marijuana increased with age, to a peak prevalence of about 23% among 18- to 25-year-olds, before declining to about 4% among individuals aged 35 and older. Given that marijuana is by far the most commonly used illicit drug (SAMHSA, 1997a), it is not surprising that

gender and age patterns for marijuana are similar to the corresponding patterns for any illicit drug (see section 4.5).

In every racial/ethnic subgroup males are more likely than females to have used marijuana in the past year, except among Native Americans and other Hispanics, two subgroups with no significant difference between males and females. In every subgroup males are more than twice as likely as females to be past-year marijuana users, except among Native Americans (16% of females versus 14% of males), other Hispanics (9.2% and 8.9%), non-Hispanic blacks (7.7% of females versus 14% of males), and non-Hispanic whites (6.7% versus 11%). Among Asian/Pacific Islanders (2.0% versus 7.7%) and South Americans (4.2% versus 13%), males are at least three times as likely as females to be past-year marijuana users.

In every age group, Puerto Ricans and non-Hispanic whites are relatively high in past-year marijuana use, while Asian/Pacific Islanders, Caribbeans, Central Americans, and Cubans are relatively low. Native Americans are relatively high at ages 12 through 34, but data for Native Americans are too sparse to yield a reliable estimate at ages 35 and older. Non-Hispanic blacks are relatively high at ages 26 and older (5.8% among individuals aged 35 and older) but about average at younger ages. Mexicans, South Americans, and other Hispanics, are about average in past-year marijuana use.

4.7 Cocaine

Table 4.6 presents the estimated percentages of individuals in the eleven racial/ethnic subgroups who reported using cocaine in the past year, by gender and age. In the total surveyed population (first row of Table 4.6), males were about twice as likely as females to have used cocaine in the past year (3.5% versus 1.7%). Past-year use of cocaine increased with age to a peak prevalence of about 6.3% among 18- to 25- year-olds before declining to about 1.1% among individuals aged 35 and older.

Racial/ethnic differences in past-year cocaine use by gender and age appear similar to the corresponding differences for any illicit drug (section 4.5) and for marijuana (section 4.6). Yet the low prevalence of cocaine use relative to marijuana and any illicit drug use makes it more difficult to detect statistically significant differences (see section 2.4). Males are significantly more likely than females to use cocaine in every subgroup, with the possible exceptions of Native Americans (insufficient data to estimate prevalence among females), South Americans (no significant male-female difference), and other Hispanics (no significant male-female difference).

Overall past-year cocaine use is relatively high among Native Americans (5.2%), Mexicans (3.9%), Puerto Ricans (3.7%), and non-Hispanic blacks (3.1%), but the age pattern of cocaine use appears different in these four subgroups: Among Native Americans and Mexicans, the peak prevalence occurs at ages 18 to 25 (11% and 7.1%, respectively), while among Puerto Ricans and non-Hispanic blacks, the peak prevalence occurs at ages 26 to 34 (9.3% and 6.1%, respectively). At ages 18 to 25, past-year cocaine use is also high among other Hispanics (12%) and among non-Hispanic whites (7%). In every age group, past-year cocaine use is relatively low among Asian/Pacific Islanders, Caribbeans, and Central Americans.

4.8 Need for Illicit Drug Abuse Treatment

Table 4.7 presents the estimated percentages of individuals in the eleven racial/ethnic subgroups who were in need of illicit drug abuse treatment, by gender and age. In the total surveyed population (first row of Table 4.7), males were about 50% more likely than females to need illicit drug abuse treatment (3.5% versus 2.1%). Treatment need increased with age to a peak prevalence of about 6.0% among 18- to 25-year-olds before declining to about 1.4% among individuals aged 35 and older.

The racial/ethnic subgroups that are relatively high in need for illicit drug abuse treatment are the same subgroups that are relatively high in past-year use of any illicit drug (see section 4.5): Native Americans (7.8%), Mexicans (3.6%), Puerto Ricans (3.7%), and non-Hispanic blacks (3.9%). Gender and age patterns of treatment need also appear very similar to the patterns observed for any illicit drug use, but it is more difficult to find statistically significant racial/ethnic differences in Table 4.7, because of the relatively low prevalence of illicit drug abuse treatment need (see section 2.4). Regardless of gender and age, Asian/Pacific Islanders (1.7%), Caribbeans (1.6%), Central Americans (1.5%), and South Americans (1.7%) appear relatively low in need for illicit drug abuse treatment.

4.9 Alcohol Dependence

Table 4.8 presents the estimated percentages of individuals in the eleven racial/ethnic subgroups who reported dependence on alcohol, by gender and age. In the total surveyed population (first row of Table 4.8), males were about twice as likely as females to be dependent on alcohol (4.9% versus 2.1%). Alcohol dependence increased with age to a peak prevalence of about 8.0% among 18- to 25-year-olds before declining to 2.2% among individuals aged 35 and older.

Gender differences and age patterns of alcohol dependence within racial/ethnic subgroups appear generally similar to the corresponding patterns in the total population, though the low prevalence of alcohol dependence implies that there is relatively little statistical power to detect racial/ethnic differences (see section 2.4). The main exception to the overall pattern is that the gender difference among Mexicans (8.4% - 2.6% = 5.8 percentage points) is significantly larger than the gender difference in any other racial/ethnic subgroup, except Central Americans (5.4% - 0.8% = 4.6 percentage points).

Racial/ethnic differences in alcohol dependence are much more similar to racial/ethnic differences in any illicit drug use (Table 4.4) than to racial/ethnic differences in past-year alcohol use (Table 4.3). The relatively high subgroups are Native Americans (5.6%) and Mexicans (5.6%), while the relatively low subgroups are Asian/Pacific Islanders (1.8%), Caribbeans (1.9%), and Cubans (0.9%).

4.10 Heavy Smoking

Table 4.9 presents the estimated percentages of individuals in the eleven racial/ethnic subgroups who reported smoking a pack or more of cigarettes per day during the past month, by gender and age. In the total surveyed population (first row of Table 4.9), males were about one-third more likely than females to smoke heavily (16% versus 12%). Heavy smoking increased with age to a peak prevalence of about 17% among 26- to 34-year-olds and remained high among individuals aged 35 and older (15%).

In some racial/ethnic subgroups, the percentage smoking heavily appears higher among females than among males, or higher at ages 35 and older than at ages 26 to 34, but these anomalies are generally not

statistically significant. Overall, gender differences and age patterns of heavy smoking within racial/ethnic subgroups appear similar to the corresponding patterns in the total population. An exception occurs among South Americans, where the percentage smoking heavily is significantly higher at ages 35 and older (12%) than at ages 26 to 34 (3.3%), which might reflect either a cohort effect or an aging effect among South Americans.

Native Americans (24%), Puerto Ricans (12%), and non-Hispanic whites (16%) are relatively high in heavy smoking, while Asian/Pacific Islanders (4.8%), Caribbeans (3.6%), Central Americans (2.3%), and Mexicans (4.7%) are relatively low. The ranking of subgroups with respect to heavy smoking prevalence is similar to the ranking with respect to past-year cigarette use (Table 4.1).

4.11 Heavy Alcohol Use

Table 4.10 presents the estimated percentages of individuals in the eleven racial/ethnic subgroups who reported using alcohol heavily during the past month (five or more drinks per occasion on five or more occasions during the past 30 days), by gender and age. In the total surveyed population (first row of Table 4.9), males were 4.3 times more likely than females to use alcohol heavily (8.6% versus 2.0%). Heavy alcohol use increased with age to a peak prevalence of about 11% among 18- to 25-year-olds before declining to 7.1% among 26- to 34-year-olds and 3.8% among individuals aged 35 and older.

Gender differences and age patterns of heavy alcohol use are generally similar across racial/ethnic subgroups: In each subgroup, males are much more likely than females to drink heavily, while young adults aged 18 to 34 are more likely to drink heavily than either adolescents aged 12 to 17 or older adults aged 35 and older. As in the results for alcohol dependence (Table 4.8), the gender difference among Mexicans is significantly larger than the gender difference in any other racial subgroup. Mexican males are about seven times more likely than Mexican females to use alcohol heavily (12% versus 1.7%), and about one-third more likely than the males of any other racial/ethnic subgroup to use alcohol heavily (12% versus 8.8% among non-Hispanic white males, the second highest). Yet Mexican females are no more likely to use alcohol heavily than females in the total surveyed population (1.7% versus 2.0%). Among the Hispanic subgroups, Central Americans, Cubans, and South Americans also have estimated ratios of male-to-female prevalence that are higher than the estimate of 4.3 for the total surveyed population. Even so, both the gender difference, measured in percentage points, and the overall prevalence of heavy alcohol use are significantly higher among Mexicans than in other racial/ethnic subgroups.

Mexicans (6.9%) and non-Hispanic whites (5.3%) are relatively high in heavy alcohol use, while Asian/Pacific Islanders (0.9%), Caribbeans (2.5%), Central Americans (2.2%), Cubans (2.8%), and South Americans (3.0%) are relatively low. Non-Hispanic whites are not significantly higher than Native Americans (4.6%), other Hispanics (4.9%), and non-Hispanic blacks (4.7%). The ranking of subgroups with respect to heavy alcohol use is similar to the ranking with respect to alcohol dependence (Table 4.8).

Table 4.1 Percentage of Persons 12 and Older Using Cigarettes, Alcohol, Any Illicit Drugs, Marijuana, and Cocaine in the Past Year, Percentage in Need of Illicit Drug Abuse Treatment, Percentage Reporting Dependence on Alcohol, Percentage Reporting Heavy Cigarette Use in the Past Month, and Percentage Reporting Heavy Alcohol Use in the Past Month. By Race/Ethnicity, 1991-1993.

	Measure								
	Cig* use-past year	Alc* use-past year	Any illicit drug-past year	Mrj* -past year	Coc* -past year	Need drug abuse treat-ment	Alc* depen-dence	Heavy cig* use-past month	Heavy alc* use-past month
Race/ethnicity									
Total surveyed population	30.9%	66.4%	11.9%	9.0%	2.5%	2.7%	3.5%	13.8%	5.1%
Native American	52.7	63.7	19.8	15.0	5.2	7.8	5.6	23.9	4.6
Asian/Pac Islander	21.7	53.2	6.5	4.7	1.4	1.7	1.8	4.8	0.9
Hispanic-Caribbean	21.2	60.8	7.6	5.6	1.5	1.6	1.9	3.6	2.5
Hispanic-C America	17.9	51.1	5.7	2.7	1.1	1.5	2.8	2.3	2.2
Hispanic-Cuba	27.3	65.7	8.2	5.9	1.7	2.6	0.9	8.9	2.8
Hispanic-Mexico	29.1	63.7	12.7	9.1	3.9	3.6	5.6	4.7	6.9
Hispanic-Puerto Rico	32.7	59.5	13.3	10.8	3.7	3.7	3.0	11.8	4.0
Hispanic-S America	31.3	74.1	10.7	8.4	2.0	1.7	2.1	6.9	3.0
Hispanic-other	25.9	66.3	10.6	9.1	2.3	3.4	3.1	5.3	4.9
Non-Hispanic black	29.9	55.4	13.1	10.6	3.1	3.9	3.4	9.1	4.7
Non-Hispanic white	31.5	68.9	11.8	8.9	2.4	2.5	3.4	15.5	5.3

Note: Heavy cigarette use is defined as smoking a pack or more per day during the past 30 days. Heavy alcohol use is defined as drinking five or more drinks per occasion on 5 or more days during the past 30 days.

*Cig = cigarettes, alc = alcohol, mrj = marijuana, coc = cocaine

Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table 4.2 Percentage Using Cigarettes in the Past Year, by Race/Ethnicity, Gender, and Age (12-17, 18-25, 26-34, 35 and Older), 1991-1993

	Group						
	Total	Female	Male	Age 12-17	Age 18-25	Age 26-34	Age 35+
Race/ethnicity							
Total surveyed population	30.9	28.4	33.6	19.1	40.2	37.3	28.7
Native American	52.7	*	*	32.8	*	*	*
Asian/Pac Islander	21.7	13.9	30.2	10.7	29.5	26.8	19.6
Hispanic-Caribbean	21.2	20.9	21.6	9.0	11.6	31.6	23.0
Hispanic-C America	17.9	11.4	26.3	8.7	18.0	21.4	18.0
Hispanic-Cuba	27.3	21.7	33.7	11.8	25.6	30.9	28.1
Hispanic-Mexico	29.1	22.0	35.5	17.1	34.2	32.3	29.1
Hispanic-Puerto Rico	32.7	29.3	36.7	16.7	39.3	38.5	32.8
Hispanic-S America	31.3	27.1	35.6	24.5	35.5	33.2	30.5
Hispanic-other	25.9	25.0	27.0	20.8	48.7	35.6	19.7
Non-Hispanic black	29.9	27.3	33.2	9.3	25.1	37.4	34.2
Non-Hispanic white	31.5	29.5	33.6	21.9	44.7	38.3	28.1

*Low precision.
Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table 4.3 Percentage Using Alcohol in the Past Year, by Race/Ethnicity, Gender, and Age (12-17, 18-25, 26-34, 35 and Older), 1991-1993

	Group						
	Total	Female	Male	Age 12-17	Age 18-25	Age 26-34	Age 35+
Race/ethnicity							
Total surveyed population	66.4	61.9	71.3	36.0	79.9	80.3	64.0
Native American	63.7	64.9	62.2	*	*	79.9	*
Asian/Pac Islander	53.2	43.7	63.7	24.2	67.5	63.6	51.1
Hispanic-Caribbean	60.8	50.2	73.0	27.7	66.0	71.2	64.3
Hispanic-C America	51.1	40.3	65.0	23.8	49.2	58.5	54.9
Hispanic-Cuba	65.7	58.7	73.8	29.9	72.5	81.3	64.1
Hispanic-Mexico	63.7	52.5	73.8	34.8	72.2	73.7	64.1
Hispanic-Puerto Rico	59.5	54.1	65.7	33.7	65.9	73.8	58.8
Hispanic-S America	74.1	65.2	83.1	52.6	*	82.8	71.6
Hispanic-other	66.3	59.7	74.0	46.3	85.4	78.9	62.5
Non-Hispanic black	55.4	50.5	61.3	28.8	68.3	70.7	52.2
Non-Hispanic white	68.9	65.2	72.8	38.2	84.2	83.5	66.0

*Low precision.

Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table 4.4 Percentage Using Any Illicit Drugs in the Past Year, by Race/Ethnicity, Gender, and Age (12-17, 18-25, 26-34, 35 and Older), 1991-1993

	Group						
	Total	Female	Male	Age 12-17	Age 18-25	Age 26-34	Age 35+
Race/ethnicity							
Total surveyed population	11.9	9.8	14.1	13.4	27.4	18.0	5.9
Native American	19.8	23.3	15.6	23.3	*	33.8	*
Asian/Pac Islander	6.5	4.2	9.1	8.5	14.6	12.2	1.4
Hispanic-Caribbean	7.6	7.1	8.2	6.5	15.9	8.0	4.5
Hispanic-C America	5.7	4.2	7.7	8.7	8.7	6.4	2.5
Hispanic-Cuba	8.2	5.5	11.4	11.3	18.3	*	3.2
Hispanic-Mexico	12.7	9.2	15.8	15.4	20.7	12.3	7.4
Hispanic-Puerto Rico	13.3	9.2	18.2	15.1	24.0	20.0	6.7
Hispanic-S America	10.7	5.8	15.5	12.2	*	10.3	4.7
Hispanic-other	10.6	10.7	10.4	17.2	34.5	16.9	3.0
Non-Hispanic black	13.1	10.2	16.6	12.0	22.3	20.0	7.7
Non-Hispanic white	11.8	9.9	13.9	13.5	30.0	18.5	5.8

The dependent variable for this table takes on a value of 1 if the respondent reported using one or more of hallucinogens, heroin, marijuana, cocaine, inhalants, or psychedelics during the past year.

*Low precision.

Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table 4.5 Percentage Using Marijuana in the Past Year, by Race/Ethnicity, Gender, and Age (12-17, 18-25, 26-34, 35 and Older), 1991-1993

	Group						
	Total	Female	Male	Age 12-17	Age 18-25	Age 26-34	Age 35+
Race/ethnicity							
Total surveyed population	9.0	6.7	11.4	9.4	23.4	14.2	3.8
Native American	15.0	16.1	13.7	14.7	23.2	29.4	*
Asian/Pac Islander	4.7	2.0	7.7	5.3	11.2	9.3	0.8
Hispanic-Caribbean	5.6	3.5	8.1	5.4	15.1	3.1	3.6
Hispanic-C America	2.7	1.5	4.3	5.7	5.9	2.5	0.0
Hispanic-Cuba	5.9	3.7	8.4	7.7	15.8	*	1.4
Hispanic-Mexico	9.1	5.5	12.4	10.6	17.0	8.8	4.5
Hispanic-Puerto Rico	10.8	7.0	15.2	13.1	19.1	16.1	5.3
Hispanic-S America	8.4	4.2	12.6	7.6	*	8.4	3.3
Hispanic-other	9.1	9.2	8.9	14.5	31.5	14.7	*
Non-Hispanic black	10.6	7.7	14.2	8.6	19.5	16.9	5.8
Non-Hispanic white	8.9	6.7	11.2	9.5	25.7	14.5	3.6

*Low precision.
Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table 4.6 Percentage Using Cocaine in the Past Year, by Race/Ethnicity, Gender, and Age (12-17, 18-25, 26-34, 35 and Older), 1991-1993

	Group						
	Total	Female	Male	Age 12-17	Age 18-25	Age 26-34	Age 35+
Race/ethnicity							
Total surveyed population	2.5	1.7	3.5	1.1	6.3	4.8	1.1
Native American	5.2	*	2.6	0.0	11.0	4.8	*
Asian/Pac Islander	1.4	0.3	2.7	0.5	3.5	*	0.6
Hispanic-Caribbean	1.5	1.5	1.5	0.1	3.3	*	0.5
Hispanic-C America	1.1	0.1	2.5	0.7	2.8	1.4	0.1
Hispanic-Cuba	1.7	0.8	2.8	1.0	2.7	5.2	0.8
Hispanic-Mexico	3.9	2.6	5.1	3.1	7.1	4.1	2.3
Hispanic-Puerto Rico	3.7	1.8	6.0	1.8	5.5	9.3	1.3
Hispanic-S America	2.0	1.5	2.5	2.6	3.8	2.2	1.0
Hispanic-other	2.3	1.9	2.7	1.1	11.7	4.9	0.0
Non-Hispanic black	3.1	2.0	4.5	0.8	4.2	6.1	2.2
Non-Hispanic white	2.4	1.6	3.2	1.0	6.8	4.7	1.0

*Low precision.

Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table 4.7 Percentage in Need of Illicit Drug Abuse Treatment, by Race/Ethnicity, Gender, and Age (12-17, 18-25, 26-34, 35 and Older), 1991-1993

	Group						
	Total	Female	Male	Age 12-17	Age 18-25	Age 26-34	Age 35+
Race/ethnicity							
Total surveyed population	2.7	2.1	3.5	3.5	6.0	4.2	1.4
Native American	7.8	*	*	1.3	*	*	*
Asian/Pac Islander	1.7	1.3	2.2	1.2	2.3	4.9	0.5
Hispanic-Caribbean	1.6	1.8	1.3	*	1.4	*	0.5
Hispanic-C America	1.5	0.8	2.4	2.1	1.8	1.5	1.1
Hispanic-Cuba	2.6	1.3	4.1	2.9	7.9	7.7	0.4
Hispanic-Mexico	3.6	2.8	4.3	5.9	4.6	3.7	2.0
Hispanic-Puerto Rico	3.7	2.7	4.9	3.3	7.3	5.6	2.0
Hispanic-S America	1.7	2.1	1.4	3.0	2.9	2.9	0.4
Hispanic-other	3.4	4.0	2.6	2.8	11.5	4.0	*
Non-Hispanic black	3.9	2.9	5.0	2.7	5.5	5.9	2.8
Non-Hispanic white	2.5	1.9	3.2	3.5	6.5	3.9	1.1

* Low precision.

Source: Office of Applied Studies, SAMHSA, National Opinion Research Center, 1991-93.

Table 4.8 Percentage Reporting Dependence on Alcohol, by Race/Ethnicity, Gender, and Age (12-17, 18-25, 26-34, 35 and Older), 1991-1993

	Group						
	Total	Female	Male	Age 12-17	Age 18-25	Age 26-34	Age 35+
Race/ethnicity							
Total surveyed population	3.5	2.1	4.9	2.7	8.0	4.7	2.2
Native American	5.6	6.8	4.3	*	*	*	*
Asian/Pac Islander	1.8	0.7	3.0	0.4	2.3	2.9	1.5
Hispanic-Caribbean	1.9	0.3	3.6	0.0	*	1.3	1.5
Hispanic-C America	2.8	0.8	5.4	1.6	5.0	3.9	1.0
Hispanic-Cuba	0.9	0.5	1.3	0.5	2.7	1.6	0.4
Hispanic-Mexico	5.6	2.6	8.4	3.5	7.3	8.4	3.8
Hispanic-Puerto Rico	3.0	1.6	4.7	1.7	4.2	4.8	2.3
Hispanic-S America	2.1	1.8	2.4	2.0	4.2	3.4	*
Hispanic-other	3.1	1.9	4.5	2.7	8.5	4.7	1.7
Non-Hispanic black	3.4	2.0	5.2	1.6	4.6	4.5	3.1
Non-Hispanic white	3.4	2.2	4.8	3.0	9.1	4.5	2.0

* Low precision.

Source: Office of Applied Studies, SAMHSA, National Opinion Research Center, 1991-93.

Table 4.9 Percentage Currently Smoking a Pack or More of Cigarettes a Day, by Race/Ethnicity, Gender, and Age (12-17, 18-25, 26-34, 35 and Older), 1991-1993

	Group						
	Total	Female	Male	Age 12-17	Age 18-25	Age 26-34	Age 35+
Race/ethnicity							
Total surveyed population	13.8	11.9	15.8	1.6	12.3	16.9	15.2
Native American	23.9	27.1	20.0	*	20.9	*	*
Asian/Pac Islander	4.8	2.4	7.3	0.8	3.8	4.9	5.9
Hispanic-Caribbean	3.6	4.3	2.9	0.0	*	5.4	5.1
Hispanic-C America	2.3	1.5	3.2	0.3	1.0	2.7	3.3
Hispanic-Cuba	8.9	4.1	14.5	0.8	6.5	12.5	9.2
Hispanic-Mexico	4.7	2.8	6.5	0.4	3.3	4.9	7.1
Hispanic-Puerto Rico	11.8	8.9	15.3	1.0	11.4	14.2	14.1
Hispanic-S America	6.9	4.0	9.8	1.4	2.4	3.3	11.8
Hispanic-other	5.3	2.9	8.1	0.0	11.6	7.9	4.3
Non-Hispanic black	9.1	6.8	12.0	0.4	4.6	11.2	12.2
Non-Hispanic white	15.5	13.8	17.4	2.1	15.3	19.7	16.4

*Low precision.

Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table 4.10 Percentage Reporting Heavy Alcohol Use in the Past Month, by Race/Ethnicity, Gender, and Age (12-17, 18-25, 26-34, 35 and Older), 1991-1993

	Group						
	Total	Female	Male	Age 12-17	Age 18-25	Age 26-34	Age 35+
Race/ethnicity							
Total surveyed population	5.1	2.0	8.6	1.6	10.8	7.1	3.8
Native American	4.6	3.3	6.1	*	6.7	*	3.1
Asian/Pac Islander	0.9	0.2	1.8	0.4	1.6	1.4	0.7
Hispanic-Caribbean	2.5	1.4	*	*	2.9	*	*
Hispanic-C America	2.2	0.3	4.6	0.5	2.8	2.3	2.2
Hispanic-Cuba	2.8	0.8	5.2	0.4	6.8	3.4	2.3
Hispanic-Mexico	6.9	1.7	11.6	2.3	7.9	8.2	7.3
Hispanic-Puerto Rico	4.0	1.2	7.3	0.7	7.0	6.7	3.0
Hispanic-S America	3.0	0.7	5.4	*	6.6	2.4	2.1
Hispanic-other	4.9	2.5	7.8	1.5	14.9	8.3	2.7
Non-Hispanic black	4.7	1.8	8.1	0.7	5.2	7.0	4.6
Non-Hispanic white	5.3	2.1	8.8	1.8	12.9	7.4	3.7

*Low precision.

Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Chapter 5 Prevalence of Substance Use by Race/Ethnicity, Age, and Other Sociodemographic Characteristics

5.1 Introduction

This chapter extends the analyses of Chapter 4 by examining the effects of other sociodemographic characteristics on racial/ethnic patterns of substance use, alcohol dependence, and need for illicit drug abuse treatment. While Chapter 4 focused strictly on gender and age patterns of substance use and other drug-related outcomes within racial/ethnic subgroups, this chapter examines how substance use within each racial/ethnic subgroup varies according to region, population density, language of interview, family income, health insurance coverage, and household member's receipt of welfare. Additional control variables in our analysis are meaningfully defined only for adolescents or only for adults: For adolescent respondents aged 12 to 17, we also examine the effects of school dropout status and family structure (whether or not the adolescent lives with two biological parents). For adult respondents aged 18 and older, we also examine the effects of educational attainment, marital status, employment status, and number of own children. (See Chapter 2 for the operational definition of each of the socioeconomic control variables.)

Two principal questions motivated the analyses of this chapter:

- Are socioeconomic and other sociodemographic differences in the prevalence of substance use and other drug-related outcomes similar across all racial/ethnic subgroups? Alternatively, such differences may be smaller within some subgroups than within others. For example, some subgroups may be especially effective in discouraging substance use by subgroup members whose socioeconomic characteristics would otherwise be associated with a high prevalence of substance use.

- To what extent do the sociodemographic differences among the racial/ethnic subgroups account for the subgroups' different patterns of substance use, alcohol dependence, and need for illicit drug abuse treatment? For example, the higher prevalence of heavy alcohol use among Mexicans compared to non-Hispanic whites (Chapter 4) might result from the large differences between Mexicans and non-Hispanic whites in family income, educational attainment, receipt of welfare, and other socioeconomic variables (see Chapter 3). If so, we would expect Mexicans and non-Hispanic whites with *similar* socioeconomic characteristics to have roughly the *same* prevalence of heavy alcohol use.

The more refined analyses of this chapter made it necessary to use a less detailed classification of race/ethnicity, a seven-category classification in place of Chapter 4's eleven-category classification. Two major changes reduced the number of categories from eleven to seven: First, this chapter does not present estimates for Native Americans because of insufficient data. Even in the less detailed analyses of Chapter 4, we found that the combined 1991-93 NHSDA sample of Native Americans (n = 416) was often too small to yield reliable prevalence estimates. Second, this chapter does not present separate

estimates for three small subgroups of Hispanics—Caribbeans, Central Americans, and South Americans—because separate estimates for these subgroups were generally too imprecise to be reported. Rather than reporting separate estimates, we combine these three small Hispanic subgroups with the "Hispanic-other" subgroup of Chapter 4 to form an expanded "Hispanic-other" subgroup. Thus, the seven racial/ethnic subgroups analyzed in this chapter are Asian/Pacific Islanders, Cubans, Mexicans, Puerto Ricans, Hispanic others (now including Caribbeans, Central Americans, and South Americans, as well as individuals who were classified as other Hispanics in Chapter 4), non-Hispanic blacks, and non-Hispanic whites. Except for the omission of Native Americans and the newly-constituted Hispanic-other subgroup, the subgroups in this chapter are the same ones that were analyzed in Chapter 4.

The main conclusions of this chapter are as follows:

- **Regional differences.** In the total surveyed population, the West is about 40% higher than the three other regions in measures of illicit drug use and need for illicit drug abuse treatment, while the South is about 15% lower than the other regions in past-year alcohol use (60% using in the past year versus about 70%). Regional differences in cigarette use and heavy alcohol use are small in magnitude. The data provide little evidence that regional differences within racial/ethnic subgroups are markedly different from regional differences in the total surveyed population. For example, among individuals aged 12 and older residing in the West, the percentages using any illicit drug in the past year equal about 7.5% among Asian/Pacific Islanders, 14% among Mexicans, 23% among Puerto Ricans, 9.7% among other Hispanics, 19% among non-Hispanic blacks, and 17% among non-Hispanic whites. Among individuals aged 12 and older residing in the North Central, the corresponding percentages equal 3.9%, 11%, 10%, 6.6%, 16%, and 10% (Table 5.30).

- **Differences by population density.** Relative to the total surveyed population, individuals residing in metropolitan areas larger than 1 million in population have moderately higher prevalences of past-year alcohol use, illicit drug use, and need for illicit drug abuse treatment. They have a moderately lower prevalence of past-year and heavy cigarette use, and heavy alcohol use; and about the same prevalence of alcohol dependence. However, differences by population density appear fairly distinctive within most Hispanic subgroups. For example, within the Mexican subgroup, the estimated prevalences of past-year illicit drug use, need for illicit drug abuse treatment, and alcohol dependence are higher outside metropolitan areas than within metropolitan areas.

- **Differences by language of interview.** Within every Hispanic subgroup, the percentages reporting past-year use of licit and illicit substances, need for illicit drug abuse treatment, and heavy cigarette use are higher among individuals who responded in English than among individuals who responded in Spanish. For illicit drug use, need for illicit drug abuse treatment, and heavy cigarette use, this difference is generally twice as high. Differences by language of

interview in the percentages who were alcohol-dependent and who used alcohol heavily are not statistically significant.

- **Differences by family income.** In the total surveyed population, the prevalence of past-year alcohol use is positively (directly) associated with family income, while the prevalences of past-year cigarette use, past-year illicit drug use, need for illicit drug abuse treatment, alcohol dependence, heavy cigarette use, and heavy alcohol use are negatively (inversely) associated with family income. Within Hispanic subgroups, however, these outcomes tend to be less strongly associated with family income than in the total surveyed population. For example, in the total surveyed population, the percentage who were dependent on alcohol declined from about 3.9% among individuals with family incomes of less than $20,000 to about 3.2% among individuals with family incomes of more than $40,000, but, within the Mexican subgroup, about 5.7% and 5.6% respectively of individuals were alcohol-dependent at each income level (Table 5.70).

- **Differences by health insurance coverage and receipt of welfare.** Both in the total surveyed population and within racial/ethnic subgroups, individuals who are not covered by health insurance or who reside in households where a family member is receiving welfare have relatively high prevalence of most substance abuse and drug-related outcomes. As in the case of family income, these associations appear less strong within Hispanic subgroups than in the total surveyed population.

- **Differences between school dropouts and adolescents still in school.** Both in the total surveyed population and within racial/ethnic subgroups, individuals aged 12 to 17 who have dropped out of school have a high prevalence of most substance use and drug-related outcomes relative to same-aged individuals still in school.

- **Differences by family structure.** Both in the total surveyed population and within most racial/ethnic subgroups, individuals aged 12 to 17 who are living with zero or one biological parent have a high prevalence of substance use and drug-related outcomes relative to same-aged individuals who are living with two biological parents. Only within the Cuban subgroup do the data suggest no large differences by family structure.

- **Differences by educational attainment.** In the total surveyed population aged 18 and older, the prevalences of past-year cigarette use, past-year illicit drug use, need for illicit drug abuse treatment, heavy cigarette use, and heavy alcohol use increase with educational attainment to a peak among individuals with 9 to 11 years of schooling. These prevalences then decline with further increases in educational attainment, while the prevalence of past-year alcohol use increases regularly with educational attainment to a peak among individuals with more than 12

years of schooling (Table 5.22). These patterns appear generally consistent across racial/ethnic subgroups.

- **Differences by marital status.** In the total surveyed population aged 18 and older, the following behaviors are more prevalent among never-married individuals than among widowed/ divorced/ separated individuals: past-year cigarette use, past-year alcohol use, past-year illicit drug use, need for illicit drug abuse treatment, alcohol dependence, and heavy alcohol use. Furthermore, except for past-year alcohol use, the prevalences of these behaviors are higher among widowed/divorced/ separated individuals than among currently married individuals. For example, about 26% of never-married individuals used any illicit drug in the past year, compared with 11% of widowed/divorced/ separated individuals and 7.2% of married individuals. The prevalence of heavy cigarette use is higher among widowed/divorced/separated individuals (20%) than among either never married (14%) or currently married (14%) individuals (Table 5.82). These patterns appear generally consistent across racial/ethnic subgroups.

- **Differences by employment status.** In the total surveyed population aged 18 and older, the prevalences of past-year cigarette use, past-year illicit drug use, need for illicit drug abuse treatment, alcohol dependence, heavy cigarette use, and heavy alcohol use are highest among unemployed individuals, second-highest among employed individuals, and lowest among individuals who are not in the labor force. The prevalence of past-year alcohol use is roughly equal between employed and unemployed individuals and about 25% lower among individuals who are not in the labor force (Table 5.22). These patterns appear generally consistent across racial/ethnic subgroups.

- **Differences by number of own children.** In the total surveyed population aged 18 and older, the prevalences of past-year illicit drug use, need for illicit drug abuse treatment, alcohol dependence, and heavy alcohol use among individuals with no children of their own are about 50% higher than among those with one or more children. In contrast, the prevalences of past-year and heavy cigarette use and past-year alcohol use do not differ significantly by number of own children. These patterns appear invariant across racial/ethnic subgroups. For example, among individuals with no children, the percentages of Asian/Pacific Islanders, Cubans, Mexicans, Puerto Ricans, Hispanic others, non-Hispanic blacks, and non-Hispanic whites who used any illicit drug in the past year are about 10%, 10%, 17%, 17%, 11%, 15%, and 13%, respectively, while, among individuals with one or more children, the corresponding percentages are about 1.7%, 5.8%, 8.7%, 9.6%, 5.8%, 12%, and 10%, respectively (Table 5.32).

- **The role of socioeconomic differences in accounting for racial/ethnic patterns of substance use.** Without exception, none of the socioeconomic variables analyzed in this chapter fully accounts for racial/ethnic differences in past-year substance use, alcohol dependence, need for illicit drug abuse treatment, and heavy cigarette and alcohol use. When racial/ethnic subgroups

are compared with respect to the prevalences of each of the nine drug-related outcome variables of this chapter, the patterns of racial/ethnic differences *within* particular socioeconomic subclasses, such as family income levels and levels of educational attainment, are generally similar to the patterns observed in the total surveyed population for that group. For example, when the comparison of racial/ethnic subgroups is restricted to individuals with family incomes greater than $40,000 or to individuals with more than 12 years of schooling, Mexicans are still the highest of the seven subgroups in past-year illicit drug use and Asian/Pacific Islanders are still the lowest, just as in the total surveyed population (Table 5.32). In future research, multiple regression and related techniques might be applied to quantitatively assess how much of racial/ethnic variations in substance use can be attributed to socioeconomic differences among the subgroups.

The remaining sections of this chapter discuss these findings in detail.

5.2 Cigarettes

Table 5.10 presents the estimated percentages of individuals aged 12 and older in the **total surveyed population** (which excludes Native Americans in this chapter[1]) and within each of the seven racial/ethnic subgroups who reported using cigarettes in the past year, by region, density, language of interview, family income, health insurance coverage, and receipt of welfare. (Also shown are percentages by gender and age, which are similar to estimates reported in Table 4.1, except that Table 5.10 uses the less refined seven-category classification of race/ethnicity.) Table 5.11 presents similar estimates for individuals aged 12 to 17, including estimates by school dropout status and family structure. Table 5.12 presents similar estimates for individuals aged 18 and older, including estimates by educational attainment, marital status, employment status, and number of own (i.e., biological) children.

For the total surveyed population, the first column of Table 5.10 shows that past-year cigarette use is:

- slightly higher in the South (32%) than in the Northeast (30%) and West (30%);
- higher among individuals who are not in metropolitan statistical areas (MSAs) than among those who are in MSAs with populations greater than 1 million (34% versus 29%);
- higher among those who used English in the interview than among those who used Spanish (31% versus 26%);

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[1]Because Native Americans made up less than 1% of the total surveyed population (Table 2.2), their exclusion from the analyses of this chapter has little effect on estimates for the total surveyed population. This chapter's conclusions about patterns of substance use and other outcomes in the total surveyed population would be unaltered if Native Americans were included in the analyses.

- higher among individuals with family incomes of $40,000 or less than among individuals with family incomes of greater than $40,000 (33% to 34% versus 28%);

- much higher among individuals who do not have health insurance coverage than among those who do (44% versus 29%); and

- much higher among individuals who have a family member in the household receiving welfare than among those who do not (46% versus 30%).

Many of these socioeconomic differences for the total surveyed population are discussed in detail in previous NHSDA reports (e.g., SAMHSA, 1997a). Similar patterns are observed in the subpopulations aged 12 to 17 (first column of Table 5.11) and 18 and over (first column of Table 5.12), except that, in the subpopulation aged 12 to 17, the North Central (21%) is significantly higher in past-year cigarette use than the South (18%) and West (19%), and there are no significant differences by family income, health insurance coverage, or welfare receipt. The first column of Table 5.11 also shows that, in the total surveyed population aged 12 to 17, past-year smoking is higher among individuals who are not living with two biological parents than among those who are (24% versus 16%), and higher among school dropouts than among those who are still in school (45% versus 18%).[2] The first column of Table 5.12 also shows that, in the population aged 18 and older, past-year smoking is:

- higher among individuals with 9 to 11 years of schooling than among individuals with more or fewer years of schooling (45% versus 35% or less);

- higher among widowed/divorced/separated (38%) and among never-married individuals (39%) than among those currently married (28%);

- higher among unemployed individuals (50%) than among individuals who are employed (34%) or not in the labor force (25%); and

- slightly higher among individuals with one or more of their own children than among individuals with no children of their own (33% versus 31%).

Within racial/ethnic subgroups (second through eighth columns of Tables 5.10, 5.11, and 5.12), most socioeconomic differences in past-year cigarette use are similar to those observed in the total surveyed

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[2]In Table 5.11 and subsequent tables of this chapter, differences by school dropout status are subject to varying interpretations because school dropouts aged 12 to 17 are generally older than non-dropouts aged 12 to 17, and because age is positively associated with cigarette and other substance use during adolescence. Higher substance use among school dropouts might be due to the higher average age of school dropouts.

population.[3] Regardless of racial/ethnic subgroup, among individuals aged 18 and older, the prevalence of past-year cigarette use was relatively high for those who resided outside of metropolitan areas with populations of more than 1 million, responded to the NHSDA interview in English rather than in Spanish, were not covered by health insurance, had a family member in the household who received welfare, or had 9 to 11 years of formal schooling (Table 5.12).

Yet there are also some important racial/ethnic differences in the effects of socioeconomic variables on past-year cigarette use:

- **Racial/ethnic differences by region and population density.** Differences by region and population density are relatively small, although statistically significant, in the total surveyed population; however, they are generally not significant within racial/ethnic subgroups. For example, within the Mexican, Hispanic other, and non-Hispanic black subgroups, past-year cigarette use is approximately equal between those residing in metropolitan areas with populations of greater than 1 million and those residing outside metropolitan areas.

- **Racial/ethnic differences by family income.** Within the Cuban, Puerto Rican, and other Hispanic subgroups, the percentage who used cigarettes in the past year is not significantly different between individuals with family incomes less than $20,000 and individuals with family incomes more than $40,000. Within the Asian-American and non-Hispanic black subgroups, individuals with family incomes lower than $20,000 are more likely to smoke than individuals with family incomes of $20,000 or higher, but there is no significant difference between the two highest income categories, $20,000-$40,000 and greater than $40,000.

- **Racial/ethnic differences by receipt of welfare and health insurance.** Differences between individuals in households that received and did not receive welfare are generally smaller within Hispanic subgroups (except Cubans) than in the total surveyed population. For example, within the Mexican subgroup, 33% of those in households that received welfare were past-year cigarette users, compared with 29% of those in households that did not receive welfare, while, in the total surveyed population, the corresponding percentages are 46% and 30%. Similarly, differences between individuals covered by health insurance and those not covered are smaller within Hispanic subgroups (except Cubans) than in the total surveyed population.

None of the socioeconomic variables analyzed in this chapter fully accounts for racial/ethnic differences in past-year cigarette use. For example, in comparing adolescents aged 12 to 17 from the seven subgroups analyzed in this chapter, non-Hispanic whites have the highest overall percentage of past-year cigarette users (22% versus 19% in the total surveyed population aged 12 to 17); and non-

[3] As shown by the asterisks in Tables 5.10- 5.12, this broad conclusion is weakened by our inability to analyze some within-subgroup socioeconomic differences in smaller racial/ethnic subgroups, because of low precision estimates for one or more categories of a control variable. Similar qualifications apply to subsequent tables of this chapter.

Hispanic white adolescents are also generally the highest when racial/ethnic subgroups are compared within particular regions, population densities, levels of family income, and other socioeconomic subclasses (see Table 5.11). Similarly, regardless of socioeconomic category, Asian/Pacific Islanders are consistently among the lowest in past-year cigarette use of the seven subgroups, both in the subpopulation aged 12 to 17 (Table 5.11) and in the subpopulation aged 18 and older (Table 5.12).

5.3 Alcohol

Table 5.20 presents the estimated percentages of individuals aged 12 and older in the total surveyed population (excluding Native Americans) and within each of the seven racial/ethnic subgroups who reported using alcohol in the past year by region, density, language of interview, family income, health insurance coverage, and receipt of welfare. Table 5.21 presents similar estimates for individuals aged 12 to 17, including estimates by school dropout status and family structure. Table 5.22 presents similar estimates for individuals aged 18 and older, including estimates by educational attainment, marital status, employment status, and number of own (i.e., biological) children.

For the total surveyed population, the first column of Table 5.20 shows that past-year alcohol use is higher:

- in the Northeast, North Central, and West (each about 70%) than in the South (59%);
- among individuals who reside in metropolitan statistical areas (MSAs) with populations larger than 1 million compared to those who live outside MSAs (70% versus 60%);
- among those who used English in the interview compared to those who used Spanish (67% versus 57%);
- among individuals with family incomes of $40,000 or more compared to individuals with family incomes less than $20,000 (73% versus 58%); and
- among individuals in households where no family member received welfare compared to individuals in households that did have a family member receiving welfare (67% versus 61%).

Except for the positive associations between alcohol use and male gender, alcohol use and young adulthood, and alcohol use and English language use, the associations between past-year alcohol use and the socioeconomic variables presented in Table 5.20 are in the opposite directions from the associations between past-year cigarette use and the same variables (previous section). Moreover, while past-year cigarette use is negatively associated with health insurance coverage, past-year alcohol use has no significant association with health insurance coverage, either among adolescents aged 12 to 17 (Table 5.21) or among adults aged 18 and older (Table 5.22).

The first column of Table 5.21 also shows that, in the total surveyed population aged 12 to 17, past-year alcohol use, like past-year cigarette use, is higher among individuals who are not living with two biological parents than among those who are (42% versus 32%), as well as being higher among school

dropouts than those still in school (54% versus 36%). The first column of Table 5.22 also shows that, in the population aged 18 and older, past-year alcohol use increases regularly with educational attainment, from about 41% among individuals with 8 or fewer years of schooling to about 79% among individuals with more than 12 years of schooling. In this respect it is unlike past-year cigarette use, which is highest among individuals with 9 to 11 years of schooling (Table 5.12). Past-year alcohol use is higher among individuals who have never been married (79%) than among widowed, divorced, or separated individuals (60%) or married individuals (70%), and higher among employed individuals (77%) than among individuals who are unemployed (73%) or not in the labor force (55%).

Within racial/ethnic subgroups (second through eighth columns of Tables 5.20, 5.21, and 5.22), most socioeconomic differences in past-year alcohol use are similar to those observed in the total surveyed population. For example, regardless of racial/ethnic subgroup, past-year alcohol use increases regularly with educational attainment (Table 5.22).

Yet there are also some important racial/ethnic differences in the effects of socioeconomic variables on past-year alcohol use:

- **Racial/ethnic differences by region and population density.** The South's relatively low percentage using alcohol in the past year holds true within the Cuban, Mexican, non-Hispanic black, and non-Hispanic white subgroups but not within other racial/ethnic subgroups. Also, within each of the four Hispanic subgroups, individuals who reside in metropolitan areas with populations greater than 1 million are not significantly higher in past-year alcohol use than individuals who reside outside metropolitan areas.

- **Racial/ethnic differences by family income.** The overall positive association between past-year alcohol use and family income does not hold for Asian/Pacific Islanders. Within the Asian/Pacific Islander subgroup aged 12 and older, about 55% of those with family incomes greater than $40,000 used alcohol in the past year, as compared with 56% of those with family incomes less than $20,000 (Table 5.20).

- **Racial/ethnic differences by receipt of welfare.** Within the non-Hispanic black and non-Hispanic white subgroups, there are no significant differences in past-year alcohol use by whether or not the individual resided in a household that received welfare.

- **Racial/ethnic differences by family structure.** For individuals aged 12 to 17 in all Hispanic subgroups except Cubans, those not living with two biological parents are significantly higher in past-year alcohol use than individuals living with two biological parents (Table 5.21). Among Cubans, there is no significant difference between the groups.

None of the socioeconomic variables analyzed in this chapter fully accounts for racial/ethnic differences in past-year alcohol use. The prevalence of past-year alcohol use is generally highest among non-Hispanic whites and lowest among Asian/Pacific Islanders, both in the total surveyed population and within subclasses defined by socioeconomic variables.

5.4 Any Illicit Drug

Table 5.30 presents the estimated percentages of individuals aged 12 and older in the total surveyed population (excluding Native Americans) and within each of the seven racial/ethnic subgroups who reported using any illicit drug in the past year, by region, density, language of interview, family income, health insurance coverage, and household member's receipt of welfare. Table 5.31 presents similar estimates for individuals aged 12 to 17, including estimates by school dropout status and family structure. Table 5.32 presents similar estimates for individuals aged 18 and older, including estimates by educational attainment, marital status, employment status, and number of own (i.e., biological) children.

For the total surveyed population, the first column of Table 5.30 shows that past-year use of any illicit drug is higher in the West (16%) than in the Northeast (11%), North Central (10%), and South (11%); higher among individuals in metropolitan statistical areas (MSAs) with populations greater than 1 million than among those outside MSAs (13% versus 11%); higher among those who used English in the interview than among those who used Spanish (12% versus 5.1%); and higher among individuals with family incomes less than $20,000 than among individuals with family incomes of more than $40,000 (14% versus 10%). It is also much higher among individuals who do not have health insurance coverage than among those who do (20% versus 11%); and much higher among individuals with a member of the household receiving welfare than without (22% versus 11%). Except for the relatively high percentage using any illicit drug in the West, and the positive association between any illicit drug use and population density, socioeconomic differences in past-year use of any illicit drug are similar to socioeconomic differences in past-year cigarette use.

Similar patterns are observed in the subpopulations aged 12 to 17 (first column of Table 5.31), and 18 and over (first column of Table 5.32), except that in the 12 to 17 group there are no significant differences by population density, family income, or health insurance coverage. The first column of Table 5.31 also shows that, in the total surveyed population aged 12 to 17 , past-year use of any illicit drug is higher among individuals who are not living with two biological parents than among those who are (18% versus 11%), and the difference between school dropouts and those still in school (31% versus 27%) is statistically significant. The first column of Table 5.32 also shows that, in the population aged 18 and older, past-year use of any illicit drug is higher among individuals with 9 to 11 years of schooling than among individuals with fewer or more years of schooling (15% versus 12% or less); higher among never-married individuals (26%) than among widowed/divorced/separated (11%) or married individuals (7.2%); higher among unemployed individuals (24%) than among individuals who are employed (13%) or not in the labor force (6.6%); and higher among individuals with no children of their own than among individuals with one or more (13% versus 9.4%). The differences by education, marital status, and employment status are similar to corresponding differences in past-year cigarette use (Table 5.12).

Within racial/ethnic subgroups (second through eighth columns of Tables 5.30, 5.31, and 5.32), most socioeconomic differences in past-year use of any illicit drug use are similar to those observed in the total surveyed population. For example, in every racial/ethnic subgroup, individuals with more than 8 years of education, never-married individuals, unemployed individuals, individuals with no children of their own, and individuals who spoke English at the interview have relatively high risks of using illicit

drugs. Within racial/ethnic subgroups as in the total surveyed population, differences by population density and by family income appear to be modest.

Yet there are some important racial/ethnic differences in the effects of socioeconomic variables on past-year use of any illicit drug:

- **Racial/ethnic differences by region.** The West is highest within most racial/ethnic subgroups, including Mexicans, Puerto Ricans, Hispanic others, non-Hispanic blacks, and non-Hispanic whites. However, among Asian/Pacific Islanders, the West (7.5%) is significantly higher than the South (3.4%) but not significantly different from the Northeast (8.7%) or North Central (3.9%).

- **Racial/ethnic differences by family structure.** Differences by family structure in adolescents' past-year use of any illicit drug are smaller within Hispanic subgroups (except Mexicans) than in the total surveyed population (Table 5.31). For example, within the Cuban subgroup, the percentage of past-year illicit drug users equals 12% among adolescents in mother/father families, compared with 11% among those in other family types.

- **Racial/ethnic differences by receipt of welfare and health insurance coverage.** Differences between those receiving and not receiving welfare and between those covered and not covered by health insurance appear smaller among Asian/Pacific Islanders and within most Hispanic subgroups (except Cubans) than in the total surveyed population.

None of the socioeconomic variables analyzed in this chapter fully accounts for racial/ethnic differences in past-year use of any illicit drug. For example, Asian/Pacific Islanders, Cubans, and other Hispanics are consistently relatively low in past-year illicit drug use, not only when racial/ethnic subgroups as a whole are compared, but also when those subgroups are compared within particular regions, population densities, income levels and other socioeconomic variables addressed in this chapter. It is important to keep in mind that the relatively low levels of this measure for these subgroups indicate only their comparison to other racial/ethnic subgroups, and do not suggest that the amount of illicit drug use is not worthy of attention. This is particularly true for a category as heterogeneous as that of Asian/Pacific Islander.

5.5 Marijuana

Table 5.40 presents the estimated percentages of individuals aged 12 and older in the total surveyed population (excluding Native Americans), and within each of the seven racial/ethnic subgroups, who reported using marijuana in the past year, by region, density, language of interview, family income, health insurance coverage, and household members' receipt of welfare. Table 5.41 presents similar estimates for individuals aged 12 to 17, including estimates by school dropout status and family structure. Table 5.42 presents similar estimates for individuals aged 18 and older, including estimates by educational attainment, marital status, employment status, and number of own (i.e., biological) children.

For the total surveyed population, the first column of Table 5.40 shows that socioeconomic differences in past-year marijuana use are similar to corresponding differences in the past-year use of any illicit drug (Table 5.30). Past-year use of marijuana is higher:

- in the West (12%) than in the Northeast (8.6%), North Central (8.0%), and South (8.2%);
- among individuals in metropolitan statistical areas (MSAs) with populations greater than 1 million than among those outside MSAs (10% versus 7.7%);
- among those who used English in the interview than among those who used Spanish (9.1% versus 2.6%); and
- among individuals with family incomes less than $20,000 than among individuals with family incomes of more than $40,000 (11% versus 7.6%).

It is also much higher among individuals who do not have health insurance coverage than among those who do (16% versus 7.8%); and much higher among individuals with a member of the household receiving welfare than among those without (17% versus 8.5%).

Similar patterns are observed in the subpopulations aged 12 to 17 (first column of Table 5.41) and 18 and over (first column of Table 5.42), except that in the subpopulation aged 12 to 17, there are no significant differences by population density, family income, or health insurance coverage. The first column of Table 5.41 also shows that, in the total surveyed population aged 12 to 17, past-year use of marijuana is higher among individuals who are not living with two biological parents than among those who are (13% versus 7.0%), and higher among school dropouts than among those still in school (28% versus 8.9%). The first column of Table 5.42 also shows that, in the population aged 18 and older, past-year use of marijuana is:

- higher among individuals with 9 to 11 years of schooling than among individuals with fewer or more years of schooling (12% versus 9% or less);
- much higher among never-married individuals (22%) than among widowed/divorced/separated (7.6%) or married individuals (4.9%);
- higher among unemployed individuals (20%) than among individuals who are employed (10%) or not in the labor force (4.5%); and
- higher among individuals living with no children of their own than among individuals living with one or more (11% versus 6.6%).

Understandably, since marijuana is the most commonly used illicit drug, socioeconomic differences in past-year marijuana use are similar to socioeconomic differences in past-year use of any illicit drug (Table 5.30). Within racial/ethnic subgroups (second through eighth columns of Tables 5.40, 5.41, and 5.42), most socioeconomic differences in past-year marijuana use are similar to those observed in the total surveyed population. For example, in every racial/ethnic subgroup, the prevalence of marijuana use is relatively high among individuals with more than 8 years of education, never-married individuals, unemployed individuals, individuals with no children of their own, and individuals who spoke English at the interview. Within racial/ethnic subgroups as in the total surveyed population, differences by population density and by family income appear to be modest.

Yet there are some important racial/ethnic differences in the effects of socioeconomic variables on past-year use of marijuana:

- **Racial/ethnic differences by region.** The West is highest within most racial/ethnic subgroups, including Asian/Pacific Islanders, Mexicans, Puerto Ricans, non-Hispanic blacks, and non-Hispanic whites. However, among other Hispanics, there are no significant regional differences.

- **Racial/ethnic differences by family structure.** Differences by family structure in adolescents' past-year marijuana use (Table 5.41) are less pronounced within the Puerto Rican, other Hispanic, and non-Hispanic black subgroups than in the total surveyed population. For example, within the Puerto Rican subgroup, the estimated percentage using marijuana in the past year equals 13% both among adolescents in mother/father families and among adolescents in all other family types.

- **Racial/ethnic differences by household member's receipt of welfare and health insurance coverage.** As in the analysis of past-year use of any illicit drug (Tables 5.30- 5.32), differences between those receiving and not receiving welfare and between those covered and not covered by health insurance appear smaller within the Asian/Pacific Islander and within most Hispanic subgroups (except Cubans) than in the total surveyed population.

None of the socioeconomic variables analyzed in this chapter fully accounts for racial/ethnic differences in past-year use of marijuana. For example, the same subgroups that are relatively low in past-year marijuana use when compared as a whole in Chapter 4 (Asian/Pacific Islanders, Cubans, and other Hispanics) are also relatively low when compared within subclasses of the socioeconomic variables examined in this chapter.

5.6 Cocaine

Table 5.50 presents the estimated percentages of individuals aged 12 and older in the total surveyed population (excluding Native Americans) and within each of the seven racial/ethnic subgroups who reported using cocaine in the past year, by region, density, language of interview, family income, health insurance coverage, and receipt of welfare. Table 5.51 presents similar estimates for individuals aged 12 to 17, including estimates by school dropout status and family structure. Table 5.52 presents similar

estimates for individuals aged 18 and older, including estimates by educational attainment, marital status, employment status, and number of own (i.e., biological) children.

For the total surveyed population, the first column of Table 5.50 shows that socioeconomic differences in past-year cocaine use are similar to corresponding differences in the past-year use of any illicit drug (Table 5.30), and in the past-year use of marijuana (Table 5.40). Past-year use of cocaine is higher in the West (3.9%) than in the Northeast (2.5%), North Central (2.1%), and South (2.0%); higher among individuals in metropolitan statistical areas (MSAs) with populations greater than 1 million than among those outside MSAs (2.9% versus 2.0%); higher among those who used English in the interview than among those who used Spanish (2.5% versus 1.7%), and higher among individuals with family incomes less than $20,000 than among individuals with family incomes of more than $40,000 (3.2% versus 2.0%). It is also higher among individuals who do not have health insurance coverage than among those who do (5.6% versus 2.0%); and higher among individuals who have a member of the household receiving welfare than among those who do not (5.7% versus 2.3%).

Similar patterns are observed in the subpopulations aged 12 to 17 (first column of Table 5.51) and 18 and over (first column of Table 5.52), except that, in the subpopulation aged 12 to 17, there are no significant differences by population density, family income, or receipt of welfare. The first column of Table 5.51 also shows that, in the total surveyed population aged 12 to 17, past-year use of cocaine is higher among individuals who are not living with two biological parents than among those who are (1.8% versus 0.7%), and higher among school dropouts than among those still in school (8.7% versus 0.9%). The first column of Table 5.52 also shows that, in the population aged 18 and older, past-year use of cocaine is higher among individuals with 9 to 11 years of schooling than among individuals with fewer or more years of schooling (4.1% versus 2.9% or less); much higher among never-married individuals (6.6%) than among widowed/divorced/separated (2.5%) or married individuals (1.4%); higher among unemployed individuals (8.4%) than among individuals who are employed (2.9%) or not in the labor force (1.0%); and higher among individuals with no children of their own than among individuals with one or more (3.2% versus 2.0%).

Within racial/ethnic subgroups (second through eighth columns of Tables 5.50, 5.51, and 5.52), most socioeconomic differences in past-year cocaine use appear similar to those observed in the total surveyed population. For example, in every racial/ethnic subgroup, individuals with more than 8 years of education, never-married individuals, unemployed individuals, individuals with no children of their own, and individuals who spoke English at the interview have relatively high prevalences of cocaine use. Within racial/ethnic subgroups as in the total surveyed population, differences by population density and by family income appear to be modest.

Yet there are some important racial/ethnic differences in the effects of socioeconomic variables on past-year use of cocaine:

- **Racial/ethnic differences by region.** The West is highest within most racial/ethnic subgroups, including Asian/Pacific Islanders, Mexicans, Puerto Ricans, non-Hispanic blacks, and non-Hispanic whites. However, among Cubans and other Hispanics, there are no significant regional differences. For Cubans in particular, this may be a result of their extreme concentration in the South.

- **Racial/ethnic differences by family structure.** Differences in adolescents' past-year cocaine use by family structure (Table 5.51) are smaller within the Cuban, Puerto Rican, and other Hispanic subgroups than in the total surveyed population.

- **Racial/ethnic differences by receipt of welfare and health insurance coverage.** As in the analyses of past-year use of any illicit drug (Tables 5.30- 5.32) and past-year marijuana use (Tables 5.40- 5.42), differences between those with a household member receiving welfare and without, and between those covered and not covered by health insurance, appear smaller within the Asian/Pacific Islander and most Hispanic subgroups than in the total surveyed population.

None of the socioeconomic variables analyzed in this chapter fully accounts for racial/ethnic differences in past-year use of cocaine. For example, as with the measures of past-year use of any illicit drug and marijuana, Asian/Pacific Islanders, Cubans, and other Hispanics are consistently relatively low in past-year cocaine use. This is true not only in comparisons between racial/ethnic groups as a whole, but also in comparisons between subclasses of racial/ethnic groups defined by levels of socioeconomic variables.

5.7 Need for Illicit Drug Abuse Treatment

Table 5.60 presents the estimated percentages of individuals aged 12 and older in the total surveyed population (excluding Native Americans) and within each of the seven racial/ethnic subgroups who needed illicit drug abuse treatment, by region, density, language of interview, family income, health insurance coverage, and receipt of welfare. (See Chapter 2 for a discussion of the criteria used to define illicit drug abuse treatment need.) Table 5.61 presents similar estimates for individuals aged 12 to 17, including estimates by school dropout status and family structure. Table 5.62 presents similar estimates for individuals aged 18 and older, including estimates by educational attainment, marital status, employment status, and number of own (i.e., biological) children.

For the total surveyed population, the first column of Table 5.60 shows that illicit drug abuse treatment need is:

- higher in the West (3.8%) than in the Northeast (2.2%), North Central (2.3%), and South (2.6%);

- higher among individuals in metropolitan statistical areas (MSAs) with populations greater than 1 million than among those outside MSAs (3.0% versus 2.3%);

- higher among those who used English in the interview than among those who used Spanish (2.7% versus 1.3%);

- higher among individuals with family incomes less than $20,000 than among individuals with family incomes of more than $40,000 (3.6% versus 2.1%);

- higher among individuals who do not have health insurance coverage than among those who do (5.3% versus 2.3%); and

- higher among individuals with a family member in the household who receives welfare than among those without (7.4% versus 2.5%).

Similar patterns are observed in the subpopulations aged 12 to 17 (first column of Table 5.61) and 18 and over (first column of Table 5.62), except that, in the subpopulation aged 12 to 17, there are no significant differences by population density, family income, or health insurance coverage. The first column of Table 5.61 also shows that, in the total surveyed population aged 12 to 17, illicit drug abuse treatment need is higher among individuals who are not living with two biological parents than among those who are (5.3% versus 2.3%) and higher among school dropouts than among those still in school (13% versus 3.2%). The first column of Table 5.62 also shows that, in the population aged 18 and older, treatment need is higher among individuals with 9 to 11 years of schooling than among individuals with fewer or more years of schooling (4.5% versus 2.9% or less); higher among never-married individuals (6.0%) than among widowed/divorced/separated (2.9%) or married individuals (1.4%); higher among unemployed individuals (8.4%) than among individuals who are employed (2.7%) or not in the labor force (1.4%); and higher among individuals with no children of their own than among individuals with one or more (3.0% versus 2.1%). The differences by education, marital status, and employment status are similar to corresponding differences in past-year use of any illicit drug, marijuana, and cocaine (Tables 5.30- 5.52).

Within racial/ethnic subgroups (second through eighth columns of Tables 5.60, 5.61, and 5.62), most socioeconomic differences in illicit drug abuse treatment need are similar to those observed in the total surveyed population. For example, in every racial/ethnic subgroup, the following have relatively high prevalences of need for treatment: individuals with 9-11 years of education, never-married individuals, unemployed individuals, individuals with no children of their own, and individuals who spoke English at the interview. Within racial/ethnic subgroups as in the total surveyed population, differences by population density and by family income appear to be modest.

Yet there are some important racial/ethnic differences in the effects of socioeconomic variables on the need for illicit drug abuse treatment:

- **Racial/ethnic differences by region.** The West is highest within most racial/ethnic subgroups, including Asian/Pacific Islanders, Puerto Ricans, non-Hispanic blacks, and non-Hispanic whites. However, within the Mexican subgroup, the estimated percentage needing treatment in the West is not significantly different from the percentages needing treatment in the North Central and South.

- **Racial/ethnic differences by family structure.** Differences by family structure in adolescent illicit drug abuse treatment need (Table 5.61) are smaller within Hispanic subgroups (except Mexicans) than in the total surveyed population. For example, within the Cuban subgroup, the

percentage needing treatment is approximately equal both among adolescents in mother/father families (2.8%) and among those in other family types (3.0%).

- **Racial/ethnic differences by receipt of welfare.** Differences between those receiving and not receiving welfare appear smaller within most Hispanic subgroups than in the total surveyed population.

None of the socioeconomic variables analyzed in this chapter fully accounts for racial/ethnic differences in illicit drug abuse treatment need. For example, Asian/Pacific Islanders are consistently relatively low in need for illicit drug use treatment and Mexicans are consistently relatively high, both in comparisons across racial/ethnic subgroups as a whole and across segments of those racial/ethnic subgroups defined by socioeconomic variables.

5.8 Alcohol Dependence

Table 5.70 presents the estimated percentages of individuals aged 12 and older in the total surveyed population (excluding Native Americans) and within each of the seven racial/ethnic subgroups who reported alcohol dependence, by region, density, language of interview, family income, health insurance coverage, and receipt of welfare. Table 5.71 presents similar estimates for individuals aged 12 to 17, including estimates by school dropout status and family structure. Table 5.72 presents similar estimates for individuals aged 18 and older, including estimates by educational attainment, marital status, employment status, and number of own (i.e., biological) children.

For the total surveyed population, the first column of Table 5.70 shows that socioeconomic differences in alcohol dependence are more similar to socioeconomic differences in the past-year use of any illicit drug (Table 5.30), marijuana (Table 5.40), and cocaine (Table 5.50) than to socioeconomic differences in the past-year use of alcohol (Table 5.20). Dependence on alcohol is higher in the West (4.9%) than in the Northeast (2.9%), North Central (3.2%), and South (3.1%); higher among individuals with family incomes less than $20,000 than among individuals with incomes of more than $40,000 (3.9% versus 3.2%); higher among individuals who do not have health insurance coverage than among those who do (5.5% versus 3.1%); and higher among individuals with a family member in the same household receiving welfare than among those without (4.8% versus 3.4%).

In the subpopulation aged 12 to 17 (first column of Table 5.71), most patterns are different: Individuals outside MSAs are higher than those within MSAs (3.6% versus 2.9% or less), individuals who used English in the interview are higher than those who used Spanish (2.7% versus 0.7%), and there are no significant differences by family income, health insurance coverage, or receipt of welfare. The first column of Table 5.71 also shows that, in the total surveyed population aged 12 to 17, alcohol dependence is not significantly different between individuals who are not living with two biological parents and those who are, or between school dropouts and those still in school. The first column of Table 5.72 also shows that, in the population aged 18 and older, alcohol dependence is higher among individuals with 9 to 11 years of schooling than among individuals with fewer years of schooling (4.0% versus 2.4%); higher among never-married individuals (7.6%) than among widowed/divorced/separated (3.0%) or married individuals (2.4%); higher among unemployed individuals (6.6%) than among

individuals who are employed (4.0%) or not in the labor force (2.1%); and higher among individuals with no children of their own than among individuals with one or more children (4.3% versus 2.5%).

Within racial/ethnic subgroups (second through eighth columns of Tables 5.70, 5.71, and 5.72), differences by region, population density, family income, family structure, and language of interview are generally modest, as in the total surveyed population, and, with few exceptions, such differences are not statistically significant within subgroups. Yet the data do suggest that some socioeconomic differences in alcohol dependence depend upon race/ethnicity:

- **Racial/ethnic differences by population density.** Within the Mexican subgroup, individuals outside MSAs are significantly more likely to be alcohol-dependent than individuals within MSAs (in the Mexican population aged 12 or older, 12% versus 5.9% or less—see Table 5.70). The same pattern of higher Mexican alcohol dependence outside MSAs holds in the subpopulations aged 12 to 17 (Table 5.71) and aged 18 and older (Table 5.72).

None of the socioeconomic variables analyzed in this chapter fully accounts for racial/ethnic differences in alcohol dependence. For example, Asian/Pacific Islanders and Cubans are consistently relatively low in alcohol dependence and Mexicans are consistently high both in the total surveyed population and within subclasses defined by socioeconomic variables.

5.9 Heavy Smoking

Table 5.80 presents the estimated percentages of individuals aged 12 and older in the total surveyed population (excluding Native Americans) and within each of the seven racial/ethnic subgroups who reported smoking heavily (a pack or more per day,) by region, density, language of interview, family income, health insurance coverage, and receipt of welfare. Table 5.81 presents similar estimates for individuals aged 12 to 17, including estimates by school dropout status and family structure. Table 5.82 presents similar estimates for individuals aged 18 and older, including estimates by educational attainment, marital status, employment status, and number of own (i.e., biological) children.

For the total surveyed population, the first column of Table 5.80 shows that the North Central region (15%) and South (15%) are significantly higher in heavy smoking than the West (12%), but not significantly higher than the Northeast (14%). Heavy smoking is also higher among individuals who are not in metropolitan statistical areas (MSAs) than among those who are in MSAs with populations greater than 1 million (17% versus 11%); higher among those who used English in the interview than among those who used Spanish (14% versus 3.3%); higher among individuals with family incomes of $40,000 or less than among individuals with family incomes of greater than $40,000 (15% or higher versus 12%); higher among individuals who do not have health insurance coverage than among those who do (21% versus 13%); and higher among individuals who receive welfare than among those who do not (22% versus 13%). In general, socioeconomic differences in heavy smoking are similar to socioeconomic differences in past-year cigarette use (Table 5.10).

Similar patterns are observed in the subpopulations aged 12 to 17 (first column of Table 5.81) and 18 and over (first column of Table 5.82), except that, in the subpopulation aged 12 to 17, there are no significant differences by family income, health insurance coverage, or region (except that the North

Central [2.1%] is significantly higher than the Northeast [1.0%]). The first column of Table 5.81 also shows that, in the total surveyed population aged 12 to 17, heavy smoking is higher among individuals who are not living with two biological parents than among those who are (2.4% versus 1.1%), and much higher among school dropouts than among those who are still in school (14% versus 1.3%). The first column of Table 5.12 also shows that, in the population aged 18 and older, heavy smoking is higher among individuals with 9 to 11 years of schooling than among individuals with more or fewer years of schooling (25% versus 17% or less); higher among widowed/divorced/separated individuals (20%) than among never-married (14%) and currently married individuals (14%); higher among unemployed individuals (24%) than among individuals who are employed (16%) or not in the labor force (12%); and slightly higher among individuals with one or more of their own children than among individuals with no children of their own (16% versus 14%). These socioeconomic differences are again quite similar to corresponding differences in past-year smoking (Tables 5.11- 5.12).

Within racial/ethnic subgroups (second through eighth columns of Tables 5.80, 5.81, and 5.82), most socioeconomic differences in heavy smoking are similar to those observed in the total surveyed population. Regardless of racial/ethnic subgroup, individuals aged 18 and older had relatively high prevalences of heavy smoking if they resided outside metropolitan areas with populations of more than 1 million, responded to the NHSDA interview in English rather than in Spanish, had between 9 and 12 years of schooling, were unemployed, or resided in households that received welfare (Table 5.82). Regardless of racial/ethnic subgroup, individuals aged 12 to 17 had relatively high prevalences of heavy smoking if they were school dropouts or lived in households where both biological parents were not present (Table 5.81). Within racial/ethnic subgroups as in the total surveyed population, differences by region, family income, marital status, and number of own children are relatively small, and these differences are generally not statistically significant within subgroups. As in the case of past-year cigarette use (Section 5.1), differences in heavy smoking by health insurance coverage and receipt of welfare appear smaller within Hispanic subgroups, except Cubans, than in the total surveyed population.

None of the socioeconomic variables analyzed in this chapter fully accounts for racial/ethnic differences in heavy smoking. For example, in comparing adolescents aged 12 to 17 and adults aged 18 and older across the seven subgroups analyzed in this chapter, non-Hispanic whites have the highest overall percentages of heavy smokers; and non-Hispanic white adolescents are also generally the highest when racial/ethnic subgroups are compared within particular regions, population densities, languages of interview, levels of family income, and other socioeconomic subclasses.

5.10 Heavy Alcohol Use

Table 5.90 presents the estimated percentages of individuals aged 12 and older in the total surveyed population (excluding Native Americans) and within each of the seven racial/ethnic subgroups who reported heavy alcohol use in the past month, by region, density, language of interview, family income, health insurance coverage, and receipt of welfare. Table 5.91 presents similar estimates for individuals aged 12 to 17, including estimates by school dropout status and family structure. Table 5.92 presents similar estimates for individuals aged 18 and older, including estimates by educational attainment, marital status, employment status, and number of own (i.e., biological) children.

For the total surveyed population, the first column of Table 5.90 shows that, regardless of region, population density, or language of interview, about 5% of individuals aged 12 and older were heavy alcohol users. Heavy drinking is higher among individuals with family incomes of less than $20,000 among individuals with family incomes of greater than $40,000 (6.2% versus 4.5%), and higher among individuals who do not have health insurance coverage than among those who do (8.6% versus 4.6%). The difference between individuals in households receiving and not receiving welfare is not statistically significant (6.0% versus 5.1%).

In the subpopulations aged 12 to 17 (first column of Table 5.91) and 18 and over (first column of Table 5.92), heavy drinking has a modest negative association with family income but most socioeconomic differences are not statistically significant. Among adolescents aged 12 to 17, heavy drinking is higher among those who are not living with two biological parents than among those who are (2.1% versus 1.3%), and also higher among school dropouts than among those still in school (6.2% versus 1.5%). Among adults aged 18 and older, heavy drinking is slightly more common among those with 9 to 11 years of schooling than among those with more or fewer years (6.8% versus 5.7% or less). Individuals who have never married (11%), are unemployed (11%), have no children of their own (6.5%), have no health insurance coverage (9.4%), or reside in households receiving welfare (7.0%) also have high prevalences of heavy drinking relative to the total surveyed population.

Within racial/ethnic subgroups (second through eighth columns of Tables 5.90, 5.91, and 5.92), most socioeconomic differences in heavy drinking are similar to those observed in the total surveyed population. Almost without exception, adults aged 18 and older within each racial/ethnic subgroup appeared to have relatively high prevalences of heavy drinking when their family income was $40,000 or less, if they had never married, if they had no children of their own, or if they lived in households where someone received welfare, but most socioeconomic differences within racial/ethnic subgroups were not statistically significant. As in the total surveyed population, differences in heavy drinking by region and population density appear to be modest within racial/ethnic subgroups.

Table 5.10 Percentage Using Cigarettes in the Past Year,
by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 12 and Older

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Total		30.8	21.7	27.3	29.1	32.7	24.1	29.9	31.5
Gender:	Female	28.2	13.9	21.7	22.0	29.3	20.6	27.3	29.5
	Male	33.5	30.2	33.7	35.5	36.7	28.1	33.2	33.6
Age:	12 to 17	19.0	10.7	11.8	17.1	16.7	16.3	9.3	21.9
	18 to 25	40.2	29.5	25.6	34.2	39.3	28.6	25.1	44.7
	26 to 34	37.2	26.8	30.9	32.3	38.5	29.3	37.4	38.3
	35 and older	28.5	19.6	28.1	29.1	32.8	21.8	34.2	28.1
Region:	Northeast	29.7	14.5	22.4	30.1	33.6	23.5	31.3	30.0
	North Central	31.0	16.8	*	31.9	28.7	29.5	33.9	30.9
	South	31.7	27.0	28.2	27.2	33.5	25.5	28.6	32.9
	West	30.0	23.8	*	29.7	29.8	23.2	26.5	31.4
Density:	MSA > 1 million	28.8	20.7	25.4	28.5	31.7	23.8	28.8	29.6
	Other MSA	31.3	23.0	*	30.5	32.8	22.1	32.6	31.5
	Not in MSA	33.7	*	*	28.3	*	26.4	29.5	34.2
Interview:	Spanish	26.2	*	26.4	28.2	25.0	19.4	*	*
	English	30.9	21.7	27.5	29.5	33.4	25.6	30.0	31.5
Family Income:	<$20,000	34.0	28.0	29.3	31.1	30.6	23.8	33.4	35.1
	$20-40,000	33.2	16.9	*	29.4	40.2	25.5	27.5	35.0
	>$40,000	27.7	20.6	25.5	26.0	31.7	23.5	26.1	28.3
Health Insured:	Yes	28.7	20.5	24.5	27.3	32.1	23.3	28.7	29.1
	No	43.5	27.6	36.9	32.3	35.3	25.5	35.7	49.9
Welfare:	Receives	45.5	*	*	33.4	34.8	31.2	38.7	55.0
	Does not	30.0	21.6	25.0	28.7	32.2	23.5	28.5	30.7

*Low precision.
Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table 5.11 Percentage Using Cigarettes in the Past Year, by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 12 to 17

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Total		19.0	10.7	11.8	17.1	16.7	16.3	9.3	21.9
Region:	Northeast	18.8	*	*	*	15.6	13.1	11.8	20.8
	North Central	21.0	5.0	*	18.4	19.7	*	10.0	23.1
	South	18.0	6.7	10.1	16.2	*	15.2	7.9	21.9
	West	18.7	12.9	*	16.8	*	18.2	10.8	21.1
Density:	MSA > 1 million	16.5	7.5	11.0	17.1	17.4	13.0	8.0	20.5
	Other MSA	20.0	13.1	*	13.9	14.5	22.7	12.1	22.3
	Not in MSA	21.8	*	*	*	*	22.4	8.4	23.0
Interview:	Spanish	9.1	*	2.1	10.9	*	3.0	*	*
	English	19.1	10.7	12.9	18.0	16.8	18.0	9.3	21.9
Family Income:	<$20,000	18.4	*	11.5	15.7	17.4	13.5	8.8	24.7
	$20-40,000	20.8	*	*	15.3	10.4	20.6	10.7	24.9
	>$40,000	18.7	11.9	9.5	20.4	19.9	17.5	9.1	19.9
School Dropout:	Yes	44.8	*	*	41.6	*	*	22.8	53.9
	No	18.4	10.8	11.1	15.8	16.0	15.6	8.9	21.3
Family:	Mother/Father	16.0	9.2	12.4	13.0	12.5	14.8	7.4	17.8
	Other	23.8	*	11.0	24.0	20.7	18.3	10.3	30.0
Health Insured:	Yes	18.8	10.3	11.5	16.8	16.9	17.6	8.6	21.4
	No	20.6	*	12.7	17.5	15.5	13.0	12.1	25.8
Welfare:	Receives	19.6	*	*	20.1	17.7	20.1	9.6	30.5
	Does not	19.0	9.7	12.2	16.6	16.2	15.8	9.2	21.5

*Low precision.
Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table 5.12 Percentage Using Cigarettes in the Past Year,
by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 18 and Older

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Total		32.1	23.1	28.3	31.3	35.4	25.1	33.2	32.4
Gender:	Female	29.2	14.0	22.3	23.2	30.7	20.8	29.9	30.2
	Male	35.2	33.3	35.2	38.6	41.1	30.2	37.4	34.8
Age:	12 to 17	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	18 to 25	40.2	29.5	25.6	34.2	39.3	28.6	25.1	44.7
	26 to 34	37.2	26.8	30.9	32.3	38.5	29.3	37.4	38.3
	35 and older	28.5	19.6	28.1	29.1	32.8	21.8	34.2	28.1
Region:	Northeast	30.7	14.7	22.8	28.7	36.7	25.1	34.3	30.8
	North Central	32.2	18.5	*	35.0	30.3	30.2	37.8	31.8
	South	33.3	30.0	29.3	29.3	35.3	26.9	31.8	34.0
	West	31.3	25.2	*	31.8	31.8	23.8	29.0	32.4
Density:	MSA > 1 million	30.1	22.2	26.3	30.5	33.9	25.3	31.9	30.3
	Other MSA	32.6	24.8	*	33.7	36.9	22.0	36.2	32.4
	Not in MSA	35.1	*	*	29.1	*	27.0	33.1	35.5
Interview:	Spanish	27.2	*	26.9	29.4	25.7	20.4	*	*
	English	32.2	23.1	29.0	32.3	36.3	26.8	33.2	32.4
Family Income:	<$20,000	35.7	30.6	30.9	34.0	33.2	25.3	37.8	35.9
	$20-40,000	34.7	18.3	*	32.2	45.8	26.2	30.4	36.1
	>$40,000	28.7	21.7	26.4	27.0	33.1	24.2	28.0	29.2
Education:	0-8 years	29.5	*	23.7	29.1	27.1	17.2	26.3	31.8
	9-11 years	45.0	*	*	41.5	40.5	31.5	44.5	46.2
	12 years	34.9	27.2	25.5	33.1	37.1	28.3	35.6	35.2
	>12 years	26.4	20.8	26.0	23.9	32.8	24.0	25.6	26.8

(continued)

Table 5.12 Percentage Using Cigarettes in the Past Year,
by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 18 and Older (continued)

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Marital Status:	Married	28.2	20.2	27.0	27.8	32.3	21.9	29.4	28.5
	Widowed/div/sep	37.5	*	26.1	35.6	33.7	31.3	35.8	38.6
	Never married	39.1	30.4	35.4	37.5	43.0	29.0	35.9	40.8
Employment:	Employed	33.7	25.0	27.5	34.3	37.9	26.2	32.1	34.4
	Unemployed	49.8	*	*	40.3	47.2	40.7	44.8	54.0
	Not in labor force	25.3	17.7	25.5	20.1	26.5	17.6	30.7	25.1
Own Children:	None	31.3	26.3	28.4	34.8	34.1	28.5	32.8	31.2
	1 or more	33.1	19.0	28.1	28.7	36.5	22.6	33.3	34.3
Health Insured:	Yes	29.8	21.9	25.3	29.2	34.7	24.2	31.8	29.8
	No	46.1	29.0	38.7	34.9	37.7	27.0	39.3	52.2
Welfare:	Receives	51.3	*	*	37.8	40.5	33.3	47.0	59.0
	Does not	31.2	23.0	25.8	30.8	34.4	24.5	31.2	31.6

N/A: Not applicable.
*Low precision.
Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table 5.20 Percentage Using Alcohol in the Past Year, by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 12 and Older

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Total		66.4	53.2	65.7	63.7	59.5	62.6	55.4	68.9
Gender:	Female	61.9	43.7	58.7	52.5	54.1	53.5	50.5	65.2
	Male	71.3	63.7	73.8	73.8	65.7	73.3	61.3	72.8
Age:	12 to 17	35.9	24.2	29.9	34.8	33.7	38.2	28.8	38.2
	18 to 25	79.9	67.5	72.5	72.2	65.9	67.7	68.3	84.2
	26 to 34	80.3	63.6	81.3	73.7	73.8	71.1	70.7	83.5
	35 and older	64.1	51.1	64.1	64.1	58.8	62.7	52.2	66.0
Region:	Northeast	71.5	51.0	75.3	74.9	58.3	64.8	61.8	74.2
	North Central	69.1	38.8	*	67.1	56.8	*	57.3	71.1
	South	59.3	59.2	60.9	60.0	59.7	65.5	51.4	60.9
	West	70.6	55.8	*	64.8	72.4	60.4	61.8	74.4
Density:	MSA > 1 million	69.7	54.3	66.0	64.9	58.9	61.2	57.3	74.8
	Other MSA	66.3	47.1	*	62.0	62.0	68.4	56.3	68.2
	Not in MSA	60.3	*	*	60.6	*	62.8	45.9	61.3
Interview:	Spanish	56.8	*	61.6	57.7	45.3	54.5	*	*
	English	66.7	53.2	68.0	66.4	60.6	65.3	55.4	68.9
Family Income:	<$20,000	58.3	55.7	52.3	57.5	53.1	54.5	50.9	60.6
	$20-40,000	64.6	44.4	*	64.7	55.2	66.0	54.7	66.9
	>$40,000	72.5	54.8	74.3	71.8	69.7	71.0	62.7	74.1
Health Insured:	Yes	66.5	52.0	67.5	65.8	59.1	63.7	54.4	68.8
	No	66.1	59.6	59.6	60.0	60.9	60.5	59.7	69.7
Welfare:	Receives	60.6	*	*	51.9	48.3	54.0	54.9	68.9
	Does not	66.7	54.1	66.8	64.7	61.9	63.4	55.5	68.9

*Low precision.
Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table 5.21 Percentage Using Alcohol in the Past Year,
by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 12 to 17

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Total		35.9	24.2	29.9	34.8	33.7	38.2	28.8	38.2
Region:	Northeast	36.6	*	*	*	27.8	38.9	30.1	39.1
	North Central	38.3	*	*	36.5	39.2	*	29.8	40.0
	South	33.1	*	34.7	32.4	38.7	37.6	27.7	35.3
	West	37.5	27.3	*	35.4	*	38.4	30.9	39.9
Density:	MSA > 1 million	36.3	21.8	32.2	35.7	36.1	33.7	28.7	40.7
	Other MSA	35.0	*	*	31.2	25.2	*	30.7	36.4
	Not in MSA	36.5	*	*	39.7	*	44.8	25.6	37.4
Interview:	Spanish	22.3	*	31.4	23.0	*	21.6	*	*
	English	36.1	24.2	29.7	36.5	34.5	40.3	28.8	38.1
Family Income:	<$20,000	34.4	*	23.5	29.2	33.1	36.8	27.8	39.6
	$20-40,000	36.5	*	*	37.8	33.6	43.5	30.1	38.6
	>$40,000	36.7	27.4	30.8	41.5	35.0	36.5	30.0	37.4
School Dropout:	Yes	54.1	*	*	43.0	*	*	*	61.8
	No	35.5	24.5	28.8	34.4	32.8	38.0	28.5	37.7
Family:	Mother/Father	32.4	22.1	30.1	30.7	30.5	35.8	25.2	33.9
	Other	41.5	*	29.6	42.0	36.8	41.5	30.8	46.5
Health Insured:	Yes	36.0	23.9	28.5	36.6	34.6	40.1	28.6	38.0
	No	35.5	*	*	31.6	28.8	33.4	30.0	39.7
Welfare:	Receives	34.1	*	*	29.5	29.8	37.1	27.7	44.8
	Does not	36.1	25.4	31.0	35.6	35.5	38.3	29.2	37.8

*Low precision.
Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table 5.22 Percentage Using Alcohol in the Past Year,
by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 18 and Older

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Total		69.8	57.0	68.1	68.9	63.7	66.0	59.6	71.9
Gender:	Female	64.7	46.0	60.9	56.1	56.9	55.4	53.7	67.8
	Male	75.5	69.3	76.5	80.5	72.0	78.3	67.0	76.5
Age:	12 to 17	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	18 to 25	79.9	67.5	72.5	72.2	65.9	67.7	68.3	84.2
	26 to 34	80.3	63.6	81.3	73.7	73.8	71.1	70.7	83.5
	35 and older	64.1	51.1	64.1	64.1	58.8	62.7	52.2	66.0
Region:	Northeast	75.0	54.1	79.5	76.4	63.6	68.8	66.6	77.3
	North Central	72.7	41.1	*	74.1	59.9	*	61.7	74.5
	South	62.3	65.5	62.5	65.4	62.4	69.3	55.1	63.6
	West	74.2	59.3	*	69.8	*	63.2	66.7	77.7
Density:	MSA > 1 million	73.2	58.0	68.2	69.8	62.4	65.0	61.4	77.7
	Other MSA	70.0	*	*	67.8	70.2	70.9	60.7	71.5
	Not in MSA	63.1	*	*	66.0	*	65.3	49.4	64.0
Interview:	Spanish	58.8	*	62.1	60.0	47.3	56.5	*	*
	English	70.1	57.0	71.8	73.8	65.2	69.4	59.6	72.0
Family Income:	<$20,000	60.9	60.6	54.8	62.8	57.1	57.1	55.0	62.3
	$20-40,000	68.0	*	*	70.0	59.3	69.2	59.0	70.0
	>$40,000	76.5	58.0	76.7	76.9	73.8	75.0	66.5	78.2
Education:	0-8 years	41.3	*	*	56.6	38.1	50.0	38.1	36.7
	9-11 years	59.2	*	*	71.4	60.9	62.7	55.6	58.9
	12 years	69.2	52.2	68.4	74.6	67.0	68.4	61.9	70.6
	>12 years	79.0	61.6	82.3	78.5	76.1	76.2	65.3	81.3

(continued)

Table 5.22 Percentage Using Alcohol in the Past Year,
by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 18 and Older (continued)

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Marital Status:	Married	69.5	54.9	70.2	67.2	63.2	66.9	57.5	71.3
	Widowed/div/sep	60.4	*	51.7	66.0	58.8	60.7	51.7	62.6
	Never married	79.3	70.0	77.5	74.9	69.0	67.0	68.5	83.6
Employment:	Employed	76.7	59.4	76.2	75.8	72.8	71.7	65.2	79.1
	Unemployed	72.8	*	*	72.0	69.7	66.8	67.3	75.7
	Not in labor force	55.2	50.4	48.0	49.3	44.3	52.6	44.4	57.2
Own Children:	None	69.2	60.8	65.7	72.6	64.7	70.8	59.0	70.6
	1 or more	70.7	52.1	70.9	66.5	63.3	62.0	60.3	74.0
Health Insured:	Yes	69.9	55.8	70.1	71.1	63.4	67.1	58.5	71.9
	No	69.6	62.8	61.6	65.1	64.8	63.6	64.4	72.6
Welfare:	Receives	66.6	*	*	59.4	54.4	57.2	62.7	72.8
	Does not	70.0	57.5	69.1	69.6	65.5	66.6	59.1	71.9

N/A: Not applicable.
*Low precision.
Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table 5.30 Percentage Using Illicit Drugs in the Past Year,
by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 12 and Older

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Total		11.8	6.5	8.2	12.7	13.3	8.8	13.1	11.8
Gender:	Female	9.7	4.2	5.5	9.2	9.2	7.3	10.2	9.9
	Male	14.1	9.1	11.4	15.8	18.2	10.5	16.6	13.9
Age:	12 to 17	13.3	8.5	11.3	15.4	15.1	12.1	12.0	13.5
	18 to 25	27.3	14.6	18.3	20.7	24.0	19.6	22.3	30.0
	26 to 34	17.9	12.2	*	12.3	20.0	10.6	20.0	18.5
	35 and older	5.9	1.4	3.2	7.4	6.7	3.4	7.7	5.8
Region:	Northeast	11.0	8.7	5.9	*	12.3	6.9	14.0	10.8
	North Central	10.4	3.9	*	11.2	10.3	6.6	15.8	9.9
	South	10.9	3.4	8.6	9.7	14.6	9.4	10.8	11.2
	West	15.8	7.5	7.9	14.4	23.3	9.7	19.2	17.0
Density:	MSA > 1 million	12.5	5.9	8.5	12.7	13.1	8.7	13.9	12.9
	Other MSA	11.7	7.1	5.0	12.1	13.4	7.9	12.3	11.8
	Not in MSA	10.6	*	*	14.1	*	9.6	11.3	10.4
Interview:	Spanish	5.1	*	4.8	5.1	4.6	5.2	*	*
	English	12.0	6.5	10.2	16.2	14.1	10.0	13.1	11.8
Family Income:	<$20,000	13.7	9.5	7.3	11.4	14.1	8.7	13.9	14.2
	$20-40,000	12.3	4.4	7.0	13.2	13.9	7.7	13.6	12.4
	>$40,000	10.4	6.0	9.3	14.1	12.1	9.5	11.7	10.3
Health Insured:	Yes	10.5	6.6	6.6	13.0	12.7	8.3	12.0	10.4
	No	19.6	6.4	13.7	12.1	15.8	9.8	18.3	22.9
Welfare:	Receives	21.7	4.3	*	17.1	15.6	12.8	22.0	24.5
	Does not	11.3	6.7	8.1	12.3	12.8	8.4	11.7	11.4

*Low precision.
Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table 5.31 Percentage Using Illicit Drugs in the Past Year,
by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 12 to 17

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Total		13.3	8.5	11.3	15.4	15.1	12.1	12.0	13.5
Region:	Northeast	12.1	*	*	*	13.0	8.1	12.0	12.4
	North Central	13.0	2.9	*	19.1	*	*	14.9	12.7
	South	11.7	*	9.9	12.6	*	7.6	9.7	12.6
	West	17.6	12.8	*	16.2	*	17.5	18.9	18.2
Density:	MSA > 1 million	12.9	5.0	10.1	14.2	17.4	10.4	11.0	14.0
	Other MSA	14.2	11.9	*	17.4	9.0	*	14.9	14.1
	Not in MSA	12.6	*	*	*	*	17.2	9.9	12.4
Interview:	Spanish	3.9	*	5.0	4.2	*	2.9	*	*
	English	13.4	8.5	12.1	17.1	15.5	13.3	12.0	13.6
Family Income:	<$20,000	13.9	*	*	13.4	15.7	13.0	12.2	14.9
	$20-40,000	14.0	*	8.0	15.4	9.6	11.0	11.9	15.0
	>$40,000	12.6	8.1	11.1	18.5	18.2	11.4	11.6	12.5
School Dropout:	Yes	31.7	*	*	26.4	*	*	21.4	37.6
	No	12.8	8.6	11.3	14.9	14.7	11.6	11.8	13.0
Family:	Mother/Father	10.5	5.9	11.6	11.8	14.4	13.4	10.1	10.6
	Other	17.6	*	10.9	21.8	15.9	10.1	13.0	19.4
Health Insured:	Yes	13.2	7.8	11.4	17.0	14.8	13.4	12.2	13.3
	No	14.0	*	11.0	12.7	17.4	8.7	11.2	15.8
Welfare:	Receives	17.3	*	3.9	18.2	14.3	13.8	15.3	20.8
	Does not	12.9	8.4	12.4	15.0	15.6	11.9	11.0	13.2

*Low precision.
Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table 5.32 Percentage Using Illicit Drugs in the Past Year,
by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 18 and Older

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Total		11.7	6.3	8.0	12.2	13.0	8.3	13.3	11.7
Gender:	Female	9.4	3.8	5.3	8.3	8.7	6.8	10.1	9.6
	Male	14.2	9.1	11.2	15.6	18.3	10.2	17.3	13.9
Age:	12 to 17	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	18 to 25	27.3	14.6	18.3	20.7	24.0	19.6	22.3	30.0
	26 to 34	17.9	12.2	*	12.3	20.0	10.6	20.0	18.5
	35 and older	5.9	1.4	3.2	7.4	6.7	3.4	7.7	5.8
Region:	Northeast	10.9	9.0	5.4	*	12.2	6.8	14.3	10.7
	North Central	10.1	4.0	*	9.4	9.5	6.7	16.0	9.6
	South	10.9	3.3	8.5	9.1	15.5	9.6	11.0	11.1
	West	15.6	6.8	7.0	14.1	19.2	8.7	19.2	16.8
Density:	MSA > 1 million	12.5	6.0	8.4	12.5	12.5	8.5	14.3	12.8
	Other MSA	11.4	6.2	5.0	11.1	14.4	7.2	11.9	11.5
	Not in MSA	10.3	*	*	13.5	*	8.6	11.6	10.2
Interview:	Spanish	5.2	*	4.8	5.2	4.7	5.3	*	*
	English	11.8	6.3	10.0	15.9	13.8	9.4	13.3	11.7
Family Income:	<$20,000	13.7	9.4	6.8	11.1	13.8	8.1	14.2	14.2
	$20-40,000	12.0	4.0	7.0	12.8	14.7	7.2	14.0	12.1
	>$40,000	10.1	5.8	9.2	13.3	11.3	9.3	11.7	10.1
Education:	0-8 Years	3.8	*	2.1	4.8	3.0	3.3	3.7	3.7
	9-11 Years	14.5	*	13.3	15.2	17.1	10.9	17.6	13.9
	12 Years	12.1	7.4	9.3	15.9	15.6	8.3	14.8	11.7
	>12 Years	11.9	6.0	8.4	16.4	11.6	10.4	11.7	12.1

(continued)

Table 5.32 Percentage Using Illicit Drugs in the Past Year,
by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 18 and Older (continued)

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Marital Status:	Married	7.2	3.0	6.1	8.2	7.9	3.7	8.8	7.3
	Widowed/div/sep	10.5	*	4.2	12.8	11.2	8.8	9.9	10.7
	Never married	26.2	14.5	18.8	21.6	25.1	19.5	21.9	28.6
Employment:	Employed	12.9	6.2	9.2	13.3	12.7	9.7	13.0	13.3
	Unemployed	24.4	*	*	19.7	27.2	11.6	25.1	25.8
	Not in labor force	6.6	6.3	2.7	6.3	9.0	4.2	9.3	6.3
Own Children:	None	13.3	10.4	10.2	17.1	17.4	11.3	14.7	13.1
	1 or more	9.4	1.7	5.8	8.7	9.6	5.8	11.7	9.5
Health Insured:	Yes	10.2	6.4	6.3	12.2	12.3	7.5	11.9	10.1
	No	20.3	5.8	13.9	12.0	15.7	9.9	19.4	23.6
Welfare:	Receives	22.7	2.9	*	16.8	16.1	12.6	24.0	25.1
	Does not	11.1	6.5	7.9	11.8	12.4	8.0	11.8	11.2

N/A: Not applicable.
*Low precision.
Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table 5.40 Percentage Using Marijuana in the Past Year, by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 12 and Older

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Total		8.9	4.7	5.9	9.1	10.8	6.6	10.6	8.9
Gender:	Female	6.6	2.0	3.7	5.5	7.0	5.1	7.7	6.7
	Male	11.4	7.7	8.4	12.4	15.2	8.3	14.2	11.2
Age:	12 to 17	9.4	5.3	7.7	10.6	13.1	9.1	8.6	9.5
	18 to 25	23.4	11.2	15.8	17.0	19.1	16.8	19.5	25.7
	26 to 34	14.1	9.3	*	8.8	16.1	7.5	16.9	14.5
	35 and older	3.7	0.8	1.4	4.5	5.3	2.1	5.8	3.6
Region:	Northeast	8.6	4.8	5.2	6.4	10.1	5.9	11.6	8.4
	North Central	8.0	2.7	*	8.4	8.4	3.9	13.5	7.4
	South	8.2	2.1	5.9	6.6	11.5	6.8	8.6	8.3
	West	11.7	6.1	*	10.7	18.3	7.2	14.6	12.5
Density:	MSA > 1 million	9.6	4.5	5.9	9.4	10.9	6.4	11.3	9.8
	Other MSA	8.9	5.4	*	8.3	9.7	5.8	10.3	8.9
	Not in MSA	7.7	5.4	*	10.0	*	8.0	8.5	7.5
Interview:	Spanish	2.6	*	2.3	2.7	3.1	1.8	*	*
	English	9.1	4.7	7.9	12.1	11.5	8.2	10.7	8.9
Family Income:	<$20,000	10.8	7.2	5.3	8.2	11.9	6.7	11.5	11.2
	$20-40,000	9.1	3.1	3.8	9.7	10.6	5.2	10.9	9.1
	>$40,000	7.6	4.3	7.1	10.2	9.5	7.3	9.1	7.5
Health Insured:	Yes	7.8	4.6	4.5	9.2	10.1	6.5	9.4	7.6
	No	15.9	5.4	10.6	8.9	13.7	6.7	16.4	18.4
Welfare:	Receives	17.1	2.9	*	12.5	11.9	10.3	18.0	19.3
	Does not	8.5	4.8	5.9	8.8	10.6	6.3	9.4	8.5

*Low precision.
Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table 5.41 Percentage Using Marijuana in the Past Year, by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 12 to 17

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Total		9.4	5.3	7.7	10.6	13.1	9.1	8.6	9.5
Region:	Northeast	9.4	1.3	*	*	10.9	6.3	9.4	9.6
	North Central	8.9	*	*	11.0	*	*	11.8	8.5
	South	7.8	0.2	6.4	8.6	4.7	3.1	6.4	8.5
	West	12.8	9.6	*	11.5	*	14.5	13.1	13.1
Density:	MSA > 1 million	9.5	4.2	5.7	9.9	15.9	7.6	8.2	10.2
	Other MSA	10.4	*	*	11.2	5.3	*	11.4	10.3
	Not in MSA	7.8	*	*	*	*	14.8	4.6	7.7
Interview:	Spanish	1.6	*	2.8	1.6	*	0.8	*	*
	English	9.5	5.3	8.3	11.9	13.4	10.2	8.6	9.5
Family Income:	<$20,000	10.1	*	*	9.3	12.5	10.3	8.9	10.7
	$20-40,000	9.8	2.7	4.8	10.2	8.7	6.2	8.8	10.5
	>$40,000	8.8	4.4	7.9	12.9	17.5	9.2	7.8	8.7
School Dropout:	Yes	28.0	*	*	21.6	*	*	16.1	34.2
	No	8.9	5.4	7.6	10.1	12.7	8.5	8.4	9.0
Family:	Mother/Father	7.0	2.6	*	7.8	12.8	10.3	7.1	7.0
	Other	13.1	*	5.9	15.5	13.3	7.4	9.5	14.5
Health Insured:	Yes	9.1	4.3	8.7	11.4	12.4	10.9	8.8	9.1
	No	11.0	*	4.9	9.2	16.8	4.5	7.9	13.0
Welfare:	Receives	13.0	*	2.6	12.2	12.2	10.4	11.8	15.8
	Does not	9.0	5.2	8.5	10.4	13.5	8.9	7.7	9.2

*Low precision.
Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table 5.42 Percentage Using Marijuana in the Past Year, by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 18 and Older

		Race/Ethnicity							
Variable/subclass		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Total		8.9	4.7	5.7	8.9	10.4	6.3	11.0	8.8
Gender:	Female	6.4	1.7	3.6	5.0	6.6	4.8	7.9	6.5
	Male	11.6	7.9	8.1	12.4	15.1	8.0	14.9	11.3
Age:	12 to 17	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	18 to 25	23.4	11.2	15.8	17.0	19.1	16.8	19.5	25.7
	26 to 34	14.1	9.3	*	8.8	16.1	7.5	16.9	14.5
	35 and older	3.7	0.8	1.4	4.5	5.3	2.1	5.8	3.6
Region:	Northeast	8.5	5.2	4.8	4.5	10.0	5.8	11.9	8.2
	North Central	7.8	2.8	*	7.8	7.3	*	13.7	7.3
	South	8.2	2.4	5.9	6.2	12.4	7.3	8.9	8.3
	West	11.6	5.6	*	10.5	13.8	6.3	14.8	12.4
Density:	MSA > 1 million	9.6	4.6	5.9	9.3	10.1	6.2	11.7	9.7
	Other MSA	8.7	5.0	*	7.7	10.6	5.4	10.1	8.7
	Not in MSA	7.6	*	*	9.3	*	7.0	9.2	7.5
Interview:	Spanish	2.6	*	2.3	2.8	3.1	1.8	*	*
	English	9.0	4.7	7.9	12.1	11.1	7.9	11.0	8.8
Family Income:	<$20,000	10.9	6.9	5.0	7.9	11.7	6.2	12.0	11.3
	$20-40,000	9.0	*	3.7	9.6	10.9	5.1	11.3	8.9
	>$40,000	7.5	4.3	7.0	9.7	8.6	7.1	9.3	7.3
Education:	0-8 Years	2.6	*	1.8	2.6	1.9	1.7	1.9	2.9
	9-11 Years	11.6	*	8.7	10.9	14.4	8.3	15.5	11.0
	12 Years	9.4	6.7	7.0	13.1	12.1	6.3	12.1	8.9
	>12 Years	8.8	3.9	5.9	11.7	9.1	8.3	9.5	8.9

(continued)

Table 5.42 Percentage Using Marijuana in the Past Year,
by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 18 and Older (continued)

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Marital Status:	Married	4.9	2.5	3.8	5.3	5.5	2.3	7.2	4.8
	Widowed/div/sep	7.6	0.2	2.7	9.3	9.3	6.7	7.4	7.7
	Never married	22.3	11.1	15.9	17.3	21.4	15.7	18.7	24.5
Employment:	Employed	10.0	4.3	6.7	9.9	10.4	7.1	10.6	10.2
	Unemployed	20.2	*	*	15.5	20.6	10.7	21.4	21.2
	Not in labor force	4.5	5.1	1.8	3.7	7.1	2.8	7.6	4.1
Own Children:	None	10.5	7.9	8.0	13.1	14.7	9.2	12.3	10.3
	1 or more	6.6	1.1	3.4	5.9	7.1	3.9	9.3	6.5
Health Insured:	Yes	7.6	4.7	4.2	8.8	9.7	5.9	9.4	7.5
	No	16.4	4.7	11.0	8.9	13.3	7.0	17.7	18.9
Welfare:	Receives	18.0	*	*	12.5	11.8	10.3	19.8	19.8
	Does not	8.4	4.8	5.8	8.6	10.2	5.9	9.7	8.5

N/A: Not applicable.
*Low precision.
Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table 5.50 Percentage Using Cocaine in the Past Year,
by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 12 and Older

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Total		2.5	1.4	1.7	3.9	3.7	1.8	3.1	2.4
Gender:	Female	1.6	0.3	0.8	2.6	1.8	1.2	2.0	1.6
	Male	3.5	2.7	2.8	5.1	6.0	2.5	4.5	3.2
Age:	12 to 17	1.1	0.5	1.0	3.1	1.8	1.1	0.8	1.0
	18 to 25	6.3	3.5	2.7	7.1	5.5	5.2	4.2	6.8
	26 to 34	4.8	*	5.2	4.1	9.3	2.8	6.1	4.7
	35 and older	1.1	0.6	0.8	2.3	1.3	0.3	2.2	1.0
Region:	Northeast	2.5	0.1	1.9	*	3.8	1.6	3.6	2.4
	North Central	2.1	0.1	*	2.2	3.0	2.2	2.8	2.0
	South	2.0	0.3	1.9	3.0	2.5	1.0	2.7	1.8
	West	3.9	2.7	0.6	4.7	6.9	2.2	5.4	3.8
Density:	MSA > 1 million	2.9	1.4	1.7	4.1	3.1	1.5	3.4	2.8
	Other MSA	2.4	1.9	*	3.5	4.7	2.4	2.6	2.3
	Not in MSA	2.0	*	*	3.9	*	2.2	2.9	1.9
Interview:	Spanish	1.7	*	1.6	1.7	2.6	1.6	*	*
	English	2.5	1.4	1.8	4.9	3.8	1.9	3.1	2.4
Family Income:	<$20,000	3.2	2.1	2.2	3.5	4.6	1.7	3.6	3.1
	$20-40,000	2.7	*	1.3	5.1	3.5	2.5	3.4	2.5
	>$40,000	2.0	1.1	1.6	3.8	2.7	1.5	2.3	1.9
Health Insured:	Yes	2.0	1.4	1.0	3.4	3.2	1.4	2.7	1.9
	No	5.6	1.8	4.0	4.7	5.6	2.7	5.1	6.3
Welfare:	Receives	5.7	2.3	*	7.0	4.4	1.3	6.2	5.7
	Does not	2.3	1.4	1.5	3.6	3.6	1.8	2.6	2.3

*Low precision.
Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table 5.51 Percentage Using Cocaine in the Past Year,
by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 12 to 17

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Total		1.1	0.5	1.0	3.1	1.8	1.1	0.8	1.0
Region:	Northeast	0.6	*	*	*	2.5	0.5	0.8	0.4
	North Central	0.8	*	*	0.6	*	*	0.4	0.9
	South	1.2	*	1.6	3.6	0.4	0.6	0.9	1.2
	West	1.8	*	*	3.3	*	1.9	0.7	1.5
Density:	MSA > 1 million	1.0	0.3	1.2	2.6	2.3	1.0	0.6	0.9
	Other MSA	1.3	*	*	4.2	*	*	0.9	1.1
	Not in MSA	1.1	*	*	*	*	0.8	*	1.0
Interview:	Spanish	0.4	*	*	0.3	*	0.5	*	*
	English	1.1	0.5	1.1	3.5	1.8	1.2	0.8	1.0
Family Income:	<$20,000	1.2	*	1.0	2.9	1.1	1.0	0.8	1.0
	$20-40,000	1.6	*	*	2.9	1.6	2.5	1.2	1.6
	>$40,000	0.9	0.2	1.3	3.5	3.6	0.4	0.2	0.8
School Dropout:	Yes	8.7	*	*	8.8	*	*	5.7	10.0
	No	0.9	0.5	0.8	2.8	1.6	1.0	0.6	0.8
Family:	Mother/Father	0.7	*	1.0	2.4	2.4	1.2	0.4	0.6
	Other	1.8	2.3	1.0	4.1	1.3	1.0	1.0	1.8
Health Insured:	Yes	0.9	0.5	0.8	2.7	2.0	0.7	0.7	0.8
	No	2.3	*	1.7	3.7	0.9	2.2	1.0	2.5
Welfare:	Receives	1.3	*	*	3.6	0.9	*	0.7	1.2
	Does not	1.1	0.2	1.0	3.0	2.3	1.2	0.8	1.0

*Low precision.
Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table 5.52 Percentage Using Cocaine in the Past Year,
by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 18 and Older

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Total		2.7	1.6	1.8	4.0	4.0	1.9	3.5	2.5
Gender:	Female	1.7	0.2	0.8	2.5	1.9	1.2	2.2	1.6
	Male	3.8	3.1	2.9	5.4	6.7	2.7	5.2	3.5
Age:	12 to 17	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	18 to 25	6.3	3.5	2.7	7.1	5.5	5.2	4.2	6.8
	26 to 34	4.8	*	5.2	4.1	9.3	2.8	6.1	4.7
	35 and older	1.1	0.6	0.8	2.3	1.3	0.3	2.2	1.0
Region:	Northeast	2.7	0.1	2.0	*	4.0	1.8	4.1	2.6
	North Central	2.2	*	*	2.6	3.6	2.4	3.2	2.2
	South	2.1	0.3	1.9	2.9	2.7	1.0	3.0	1.9
	West	4.1	2.9	0.7	4.9	7.7	2.3	6.1	4.0
Density:	MSA > 1 million	3.1	1.5	1.8	4.3	3.2	1.6	3.8	2.9
	Other MSA	2.5	*	*	3.4	5.8	2.4	2.9	2.4
	Not in MSA	2.1	*	*	4.3	*	2.4	3.2	2.0
Interview:	Spanish	1.8	*	1.6	1.8	2.7	1.7	*	*
	English	2.7	1.6	1.9	5.3	4.2	2.0	3.5	2.5
Family Income:	<$20,000	3.4	2.2	2.3	3.6	5.3	1.8	4.0	3.3
	$20-40,000	2.9	*	1.4	5.6	3.8	2.6	3.8	2.6
	>$40,000	2.1	1.2	1.6	3.8	2.6	1.6	2.6	2.0
Education:	0-8 Years	1.3	*	0.9	1.2	1.3	0.7	1.7	1.4
	9-11 Years	4.1	*	4.4	6.7	6.3	2.7	6.1	3.5
	12 Years	2.9	1.8	2.0	5.2	4.2	2.7	3.2	2.7
	>12 Years	2.3	1.5	1.2	4.6	3.1	1.5	2.7	2.3

(continued)

Table 5.52 Percentage Using Cocaine in the Past Year,
by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 18 and Older (continued)

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Marital Status:	Married	1.4	1.0	1.2	2.6	1.8	0.5	2.0	1.3
	Widowed/div/sep	2.5	*	2.0	3.5	4.3	1.7	3.3	2.3
	Never married	6.6	3.2	3.5	7.8	8.4	5.3	5.6	7.0
Employment:	Employed	2.9	1.3	2.0	4.2	4.2	2.2	2.8	2.9
	Unemployed	8.4	*	*	8.8	9.3	3.3	9.3	8.5
	Not in labor force	1.0	*	0.3	1.8	2.0	0.7	2.7	0.8
Own Children:	None	3.2	2.8	2.2	6.1	5.6	2.9	4.1	2.9
	1 or more	2.0	0.2	1.4	2.6	2.8	1.0	2.7	1.9
Health Insured:	Yes	2.1	1.5	1.1	3.5	3.5	1.5	3.0	2.0
	No	5.9	2.0	4.2	4.9	6.1	2.7	5.7	6.6
Welfare:	Receives	6.7	*	*	8.2	5.6	1.4	7.8	6.5
	Does not	2.5	1.5	1.6	3.7	3.7	1.9	2.9	2.4

N/A: Not applicable.
*Low precision.
Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table 5.60 Percentage in Need of Illicit Drug Abuse Treatment, by Race/Ethnicity and Sociodemographic Characteristics,1991-1993
Respondents Aged 12 and Older

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Total		2.7	1.7	2.6	3.6	3.7	2.3	3.9	2.5
Gender:	Female	2.0	1.3	1.3	2.8	2.7	2.4	2.9	1.9
	Male	3.4	2.2	4.1	4.3	4.9	2.1	5.0	3.2
Age:	12 to 17	3.5	1.2	2.9	5.9	3.3	2.5	2.7	3.5
	18 to 25	6.0	2.3	7.9	4.6	7.3	4.3	5.5	6.5
	26 to 34	4.1	4.9	7.7	3.7	5.6	2.8	5.9	3.9
	35 and older	1.3	0.5	0.4	2.0	2.0	1.2	2.8	1.1
Region:	Northeast	2.2	*	*	*	4.0	1.2	3.4	2.1
	North Central	2.3	0.3	*	4.0	3.2	0.3	3.4	2.2
	South	2.6	1.1	2.7	3.6	1.7	2.6	3.6	2.4
	West	3.8	2.3	*	3.6	6.9	2.9	7.0	3.8
Density:	MSA > 1 million	3.0	1.9	2.3	3.4	3.3	2.2	3.8	2.9
	Other MSA	2.6	1.5	*	3.9	3.7	2.0	4.0	2.4
	Not in MSA	2.3	*	*	4.2	10.4	2.7	3.7	2.2
Interview:	Spanish	1.3	*	1.0	1.3	1.6	1.4	*	*
	English	2.7	1.7	3.5	4.7	3.9	2.5	3.9	2.5
Family Income:	<$20,000	3.6	2.9	2.8	3.6	4.7	2.0	4.3	3.5
	$20-40,000	2.8	0.2	2.3	4.1	3.8	1.9	4.2	2.5
	>$40,000	2.1	1.7	2.6	3.3	2.5	2.8	2.9	2.0
Health Insured:	Yes	2.3	1.9	1.5	3.3	3.2	2.1	3.6	2.1
	No	5.3	1.1	6.3	4.1	5.8	2.5	4.9	6.0
Welfare:	Receives	7.4	2.3	*	5.6	5.1	2.4	7.9	8.2
	Does not	2.5	1.7	2.5	3.4	3.4	2.2	3.2	2.3

*Low precision.
Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table 5.61 Percentage in Need of Illicit Drug Abuse Treatment, by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 12 to 17

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Total		3.5	1.2	2.9	5.9	3.3	2.5	2.7	3.5
Region:	Northeast	2.2	0.6	*	*	3.9	1.3	2.0	2.2
	North Central	3.1	*	*	6.1	*	*	2.4	3.2
	South	3.6	*	2.6	6.2	0.5	2.4	2.4	3.8
	West	4.8	1.3	*	5.7	*	3.4	6.7	4.8
Density:	MSA > 1 million	3.2	0.6	2.6	5.5	3.2	2.2	2.3	3.4
	Other MSA	3.7	*	*	6.9	*	*	3.8	3.4
	Not in MSA	3.7	*	*	5.3	*	3.0	2.5	3.8
Interview:	Spanish	0.7	*	*	0.7	*	0.5	*	*
	English	3.5	1.2	3.2	6.7	3.4	2.7	2.8	3.5
Family Income:	<$20,000	3.6	*	1.7	6.0	3.4	1.4	2.8	3.7
	$20-40,000	4.3	*	1.3	6.3	2.9	3.6	3.4	4.5
	>$40,000	3.1	1.5	5.1	5.5	3.4	3.4	2.0	3.1
School Dropout:	Yes	13.1	*	*	10.5	*	*	8.5	16.1
	No	3.2	1.2	2.7	5.7	3.1	2.5	2.6	3.2
Family:	Mother/Father	2.3	*	2.8	3.8	2.8	2.4	1.3	2.4
	Other	5.3	3.0	3.0	9.4	3.8	2.6	3.5	5.7
Health Insured:	Yes	3.4	1.1	3.2	6.4	2.8	2.4	2.8	3.4
	No	4.1	*	2.0	5.1	6.2	2.8	2.4	4.5
Welfare:	Receives	5.3	*	*	5.8	3.3	*	3.9	7.5
	Does not	3.3	0.9	2.9	5.9	3.3	2.6	2.4	3.3

*Low precision.
Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table 5.62 Percentage in Need of Illicit Drug Abuse Treatment, by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 18 and Older

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Total		2.6	1.8	2.6	3.2	3.8	2.2	4.0	2.4
Gender:	Female	1.9	1.2	1.2	2.2	2.7	2.3	2.9	1.7
	Male	3.4	2.5	4.2	4.0	5.1	2.1	5.5	3.2
Age:	12 to 17	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	18 to 25	6.0	2.3	7.9	4.6	7.3	4.3	5.5	6.5
	26 to 34	4.1	4.9	7.7	3.7	5.6	2.8	5.9	3.9
	35 and older	1.3	0.5	0.4	2.0	2.0	1.2	2.8	1.1
Region:	Northeast	2.2	*	*	*	4.0	1.2	3.6	2.0
	North Central	2.2	0.3	*	3.6	3.4	0.2	3.5	2.1
	South	2.5	0.9	2.7	3.1	1.8	2.6	3.8	2.2
	West	3.7	2.5	*	3.2	7.1	2.8	7.1	3.7
Density:	MSA > 1 million	3.0	2.0	2.3	3.0	3.4	2.2	4.0	2.8
	Other MSA	2.5	1.3	*	3.3	3.9	1.9	4.1	2.3
	Not in MSA	2.2	*	*	3.9	11.0	2.6	3.9	2.0
Interview:	Spanish	1.3	*	1.0	1.3	1.6	1.5	*	*
	English	2.7	1.8	3.5	4.2	4.0	2.5	4.0	2.4
Family Income:	<$20,000	3.6	3.2	2.9	3.1	4.9	2.1	4.6	3.5
	$20-40,000	2.6	0.2	2.4	3.7	4.0	1.6	4.4	2.3
	>$40,000	2.0	1.8	2.5	2.9	2.4	2.7	3.0	1.8
Education:	0-8 Years	1.9	*	1.0	1.6	2.4	0.6	1.9	2.0
	9-11 Years	4.5	1.3	4.9	5.7	5.3	2.9	6.6	4.0
	12 Years	2.9	2.0	*	3.2	3.4	2.7	4.2	2.7
	>12 Years	2.0	1.8	1.6	3.1	3.6	2.5	2.9	1.8

(continued)

Table 5.62 Percentage in Need of Illicit Drug Abuse Treatment, by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 18 and Older (continued)

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Marital Status:	Married	1.4	1.3	1.1	2.1	1.5	1.2	2.9	1.3
	Widowed/div/sep	2.9	*	2.0	3.3	4.2	4.4	3.0	2.9
	Never married	6.0	3.4	*	5.8	8.2	3.2	6.3	6.1
Employment:	Employed	2.7	2.0	2.2	3.2	3.6	2.6	3.6	2.5
	Unemployed	8.4	*	*	6.8	9.2	2.6	9.2	8.7
	Not in labor force	1.4	0.6	1.5	1.8	2.5	1.2	2.9	1.2
Own Children:	None	3.0	2.8	3.5	4.9	5.2	1.9	4.4	2.8
	1 or more	2.1	0.7	1.6	1.9	2.7	2.4	3.5	1.9
Health Insured:	Yes	2.2	2.0	1.4	2.7	3.3	2.1	3.8	1.9
	No	5.5	1.0	6.6	3.9	5.7	2.5	5.3	6.2
Welfare:	Receives	7.8	*	*	5.6	5.7	2.5	9.1	8.3
	Does not	2.4	1.8	2.5	3.0	3.5	2.2	3.3	2.2

* Low precision.
Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table 5.70 Percentage Reporting Dependence on Alcohol, by Race/Ethnicity and Sociodemographic Characteristics,1991-1993
Respondents Aged 12 and Older

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Total		3.5	1.8	0.9	5.6	3.0	2.7	3.4	3.4
Gender:	Female	2.1	0.7	0.5	2.6	1.6	1.4	2.0	2.2
	Male	5.0	3.0	1.3	8.4	4.7	4.2	5.2	4.8
Age:	12 to 17	2.7	0.4	0.5	3.5	1.7	1.9	1.6	3.0
	18 to 25	7.9	2.3	2.7	7.3	4.2	5.7	4.6	9.1
	26 to 34	4.7	2.9	1.6	8.4	4.8	3.7	4.5	4.5
	35 and older	2.2	1.5	0.4	3.8	2.3	1.3	3.1	2.0
Region:	Northeast	2.9	0.3	0.2	3.2	3.1	2.0	3.4	2.9
	North Central	3.2	*	*	3.9	5.2	1.7	3.7	3.1
	South	3.1	0.9	1.0	6.0	1.1	2.2	3.0	3.1
	West	4.9	2.2	*	5.8	3.7	3.3	5.8	5.1
Density:	MSA > 1 million	3.6	1.7	1.0	4.7	2.8	2.3	3.6	3.8
	Other MSA	3.2	*	0.4	5.9	3.9	3.1	3.2	3.1
	Not in MSA	3.5	*	*	11.5	*	3.5	3.5	3.4
Interview:	Spanish	3.5	*	0.8	4.3	0.4	2.5	*	*
	English	3.5	1.8	0.9	6.3	3.3	2.7	3.5	3.4
Family Income:	<$20,000	3.9	1.2	0.9	5.7	2.8	2.5	3.8	4.0
	$20-40,000	3.4	*	0.9	5.6	2.0	3.1	3.2	3.4
	>$40,000	3.2	2.0	0.8	5.6	3.8	2.6	3.1	3.1
Health Insured:	Yes	3.1	2.0	0.7	5.3	2.9	2.6	3.3	3.1
	No	5.5	0.6	1.4	6.2	3.4	2.8	4.3	6.1
Welfare:	Receives	4.8	*	*	4.2	2.5	3.6	4.7	5.4
	Does not	3.4	1.9	0.8	5.8	3.2	2.6	3.2	3.4

* Low precision.
Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table 5.71 Percentage Reporting Dependence on Alcohol,
by Race/Ethnicity and Sociodemographic Characteristics,1991-1993
Respondents Aged 12 to 17

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Total		2.7	0.4	0.5	3.5	1.7	1.9	1.6	3.0
Region:	Northeast	2.1	*	*	*	1.7	0.6	1.1	2.5
	North Central	2.6	*	*	2.5	*	*	0.7	3.0
	South	2.8	*	0.8	3.9	0.2	*	1.7	3.1
	West	3.0	0.7	*	3.5	*	2.9	3.7	3.0
Density:	MSA > 1 million	1.9	0.6	0.6	2.6	1.8	1.3	0.8	2.3
	Other MSA	2.9	*	*	3.3	*	0.3	2.7	3.1
	Not in MSA	3.6	*	*	9.0	*	4.8	2.3	3.5
Interview:	Spanish	0.7	*	*	1.0	0.0	*	*	*
	English	2.7	0.4	0.5	3.9	1.8	2.1	1.6	3.0
Family Income:	<$20,000	2.6	0.0	0.2	3.4	0.7	2.5	1.5	3.3
	$20-40,000	2.6	*	*	1.9	0.8	2.2	2.8	2.8
	>$40,000	2.7	0.7	0.8	4.9	4.4	0.6	0.7	2.9
School Dropout:	Yes	4.0	*	*	3.2	*	*	*	4.2
	No	2.6	0.4	0.5	3.6	1.6	1.8	1.5	2.9
Family:	Mother/Father	2.4	0.5	0.7	3.4	2.2	1.2	0.9	2.7
	Other	3.0	0.3	0.2	3.9	1.3	2.8	2.0	3.5
Health Insured:	Yes	2.6	0.5	0.4	3.6	1.3	2.4	1.3	2.9
	No	3.0	*	0.8	3.4	3.9	0.4	2.8	3.2
Welfare:	Receives	1.8	*	*	2.9	0.2	*	1.2	2.6
	Does not	2.7	0.5	0.6	3.6	2.4	1.8	1.7	3.0

* Low precision.
Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table 5.72 Percentage Reporting Dependence on Alcohol,
by Race/Ethnicity and Sociodemographic Characteristics,1991-1993
Respondents Aged 18 and Older

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Total		3.6	2.0	0.9	6.0	3.3	2.8	3.7	3.5
Gender:	Female	2.0	0.6	0.5	2.2	1.7	1.2	2.1	2.1
	Male	5.2	3.5	1.4	9.4	5.1	4.6	5.7	5.0
Age:	12 to 17	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	18 to 25	7.9	2.3	2.7	7.3	4.2	5.7	4.6	9.1
	26 to 34	4.7	2.9	1.6	8.4	4.8	3.7	4.5	4.5
	35 and older	2.2	1.5	0.4	3.8	2.3	1.3	3.1	2.0
Region:	Northeast	2.9	0.4	0.2	2.8	3.3	2.2	3.7	3.0
	North Central	3.3	*	*	4.3	5.7	1.7	4.2	3.2
	South	3.2	1.0	1.0	6.4	1.2	2.3	3.2	3.1
	West	5.1	2.4	*	6.2	3.9	3.4	6.2	5.3
Density:	MSA > 1 million	3.8	1.8	1.0	5.1	2.9	2.5	4.0	3.9
	Other MSA	3.2	*	*	6.4	4.4	3.4	3.3	3.1
	Not in MSA	3.5	*	*	12.2	*	3.3	3.7	3.4
Interview:	Spanish	3.7	*	0.8	4.5	0.5	2.6	*	*
	English	3.6	2.0	0.9	6.8	3.5	2.8	3.7	3.5
Family Income:	<$20,000	4.1	1.4	0.9	6.2	3.3	2.5	4.2	4.0
	$20-40,000	3.5	*	1.0	6.3	2.3	3.3	3.2	3.5
	>$40,000	3.2	2.1	0.8	5.7	3.7	2.8	3.4	3.2
Education:	0-8 Years	2.4	*	*	4.7	1.1	1.7	2.6	1.9
	9-11 Years	4.0	0.1	2.5	6.9	2.6	3.8	4.7	3.7
	12 Years	3.9	0.6	0.7	7.3	3.4	3.2	4.1	3.9
	>12 Years	3.4	3.0	0.7	5.9	4.8	2.6	3.2	3.4

Table 5.72 Percentage Reporting Dependence on Alcohol,
by Race/Ethnicity and Sociodemographic Characteristics,1991-1993
Respondents Aged 18 and Older (continued)

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Marital Status:	Married	2.4	2.1	0.5	5.0	2.6	1.8	3.3	2.2
	Widowed/div/sep	3.0	0.5	1.0	4.8	4.2	2.2	2.7	3.1
	Never married	7.6	2.2	2.2	9.4	3.7	5.5	5.1	8.6
Employment:	Employed	4.0	2.3	0.9	6.9	3.3	2.8	3.6	3.9
	Unemployed	6.6	*	1.7	9.8	4.2	4.8	6.2	6.9
	Not in labor force	2.1	1.2	0.7	2.4	2.9	2.1	3.2	2.0
Own Children:	None	4.3	3.0	1.3	7.8	4.4	3.8	4.2	4.2
	1 or more	2.5	0.9	0.5	4.7	2.4	1.8	3.2	2.3
Health Insured:	Yes	3.2	2.3	0.7	5.6	3.2	2.6	3.6	3.1
	No	5.8	0.7	1.5	6.7	3.3	3.0	4.5	6.4
Welfare:	Receives	5.4	*	*	4.6	3.2	3.8	5.7	5.9
	Does not	3.5	2.0	0.8	6.1	3.3	2.7	3.5	3.4

N/A: Not applicable.
* Low precision.
Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table 5.80 Percentage Reporting Currently Smoking a Pack or More of Cigarettes a Day, by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 12 and Older

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Total		13.7	4.8	8.9	4.7	11.8	4.5	9.1	15.5
Gender:	Female	11.8	2.4	4.1	2.8	8.9	2.9	6.8	13.8
	Male	15.7	7.3	14.5	6.5	15.3	6.5	12.0	17.4
Age:	12 to 17	1.6	0.8	0.8	0.4	1.0	0.4	0.4	2.1
	18 to 25	12.2	3.8	6.5	3.3	11.4	3.8	4.6	15.3
	26 to 34	16.8	4.9	12.5	4.9	14.2	4.8	11.2	19.7
	35 and older	15.2	5.9	9.2	7.1	14.1	5.7	12.2	16.4
Region:	Northeast	13.6	3.3	5.4	*	12.3	4.7	10.6	14.7
	North Central	14.5	*	*	7.6	9.3	7.5	10.2	15.4
	South	14.5	3.0	9.9	4.6	11.5	5.1	8.4	16.9
	West	11.5	6.1	*	4.3	12.3	3.8	8.0	14.2
Density:	MSA > 1 million	11.4	4.3	9.0	3.8	11.6	3.8	8.5	13.7
	Other MSA	14.3	6.0	*	6.1	10.2	6.1	10.8	15.5
	Not in MSA	17.2	*	*	6.8	*	5.6	8.7	18.3
Interview:	Spanish	3.3	*	8.2	2.5	7.2	2.9	*	*
	English	13.9	4.8	9.0	5.8	12.3	5.1	9.2	15.5
Family Income:	<$20,000	14.6	5.4	10.4	5.1	11.2	5.4	10.1	17.4
	$20-40,000	16.2	5.8	7.8	5.3	13.2	4.0	7.6	19.2
	>$40,000	12.2	4.3	8.4	3.9	12.0	3.7	8.6	13.3
Health Insured:	Yes	12.5	4.3	7.4	5.0	11.7	4.5	8.9	13.8
	No	20.7	7.2	14.2	4.3	12.4	4.6	10.4	28.5
Welfare:	Receives	22.0	*	*	7.2	14.1	5.5	12.6	33.4
	Does not	13.3	4.7	8.3	4.5	11.3	4.4	8.6	15.0

*Low precision.
Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table 5.81 Percentage Currently Smoking a Pack or More of Cigarettes a Day, by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 12 to 17

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Total		1.6	0.8	0.8	0.4	1.0	0.4	0.4	2.1
Region:	Northeast	1.0	*	*	*	1.4	0.2	0.7	1.0
	North Central	2.1	*	*	0.2	0.2	*	0.6	2.5
	South	1.6	*	1.2	0.3	0.4	0.0	0.3	2.3
	West	1.5	0.8	*	0.4	*	0.6	0.1	2.2
Density:	MSA > 1 million	1.2	1.2	1.0	0.2	1.4	0.4	0.4	1.6
	Other MSA	1.9	*	*	0.7	*	*	0.6	2.4
	Not in MSA	1.9	*	*	*	*	*	*	2.2
Interview:	Spanish	0.5	*	*	0.7	*	*	*	*
	English	1.6	0.8	0.9	0.3	1.0	0.4	0.4	2.1
Family Income:	<$20,000	1.7	*	1.1	0.6	1.3	0.2	0.5	2.7
	$20-40,000	1.7	*	*	0.2	*	*	0.3	2.4
	>$40,000	1.5	*	*	0.1	*	0.3	0.2	1.7
School Dropout:	Yes	14.1	*	*	5.6	*	*	1.8	20.8
	No	1.3	0.8	0.6	0.1	0.7	0.3	0.4	1.7
Family:	Mother/Father	1.1	*	0.5	0.0	0.4	*	0.2	1.4
	Other	2.4	*	1.1	1.0	1.5	0.9	0.5	3.4
Health Insured:	Yes	1.5	0.9	0.3	0.2	0.8	0.5	0.4	1.9
	No	2.1	*	2.1	0.7	1.9	*	0.2	3.6
Welfare:	Receives	2.5	*	*	0.7	1.9	*	0.8	4.7
	Does not	1.5	0.0	0.9	0.3	0.6	0.4	0.3	1.9

*Low precision.
Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table 5.82 Percentage Reporting Currently Smoking a Pack or More of Cigarettes a Day, by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 18 and Older

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Total		15.1	5.3	9.5	5.5	13.6	5.1	10.5	16.9
Gender:	Female	12.9	2.7	4.3	3.3	10.1	3.2	7.7	14.9
	Male	17.4	8.2	15.4	7.5	18.0	7.4	14.1	19.0
Age:	12 to 17	*	*	*	*	*	*	*	*
	18 to 25	12.2	3.8	6.5	3.3	11.4	3.8	4.6	15.3
	26 to 34	16.8	4.9	12.5	4.9	14.2	4.8	11.2	19.7
	35 and older	15.2	5.9	9.2	7.1	14.1	5.7	12.2	16.4
Region:	Northeast	14.9	3.5	5.7	*	14.3	5.4	12.1	15.9
	North Central	15.9	*	*	9.3	10.9	8.2	11.8	16.8
	South	16.0	3.5	10.5	5.4	12.9	5.8	9.7	18.4
	West	12.6	6.7	*	5.0	14.3	4.2	9.3	15.3
Density:	MSA > 1 million	12.5	4.7	9.5	4.4	13.1	4.3	9.7	14.7
	Other MSA	15.8	*	*	7.2	12.5	6.9	12.5	16.9
	Not in MSA	19.1	*	*	8.5	*	6.4	10.2	20.1
Interview:	Spanish	3.5	*	8.4	2.7	7.5	3.1	*	*
	English	15.3	5.3	9.8	7.1	14.3	5.8	10.5	16.9
Family Income:	<$20,000	16.0	5.9	11.2	5.9	13.2	6.2	11.8	18.6
	$20-40,000	18.0	6.6	8.4	6.3	15.5	4.5	8.9	20.9
	>$40,000	13.4	4.7	8.8	4.5	13.4	4.1	9.5	14.6
Education:	0-8 years	13.9	*	8.1	5.2	8.8	3.7	9.1	18.9
	9-11 years	25.2	6.2	14.1	8.1	17.3	6.6	15.6	30.3
	12 years	17.3	10.8	10.0	6.1	13.7	6.7	10.9	19.2
	>12 years	10.4	3.1	8.4	3.2	12.5	3.7	7.4	11.3

(continued)

Table 5.82 Percentage Reporting Currently Smoking a Pack or More of Cigarettes a Day, by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 18 and Older (continued)

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Marital Status:	Married	14.2	4.6	8.5	5.0	13.3	4.7	10.4	15.6
	Widowed/div/sep	19.6	*	9.8	10.4	13.3	6.0	11.5	22.5
	Never married	13.6	6.0	12.9	4.2	14.5	5.4	9.8	16.0
Employment:	Employed	15.9	5.9	9.9	5.7	15.4	4.2	10.5	17.9
	Unemployed	24.1	*	*	7.6	17.1	12.7	14.7	30.3
	Not in labor force	11.6	3.0	6.5	4.4	9.2	4.6	8.8	12.7
Own Children:	None	14.2	6.8	9.9	5.8	14.4	5.0	10.8	15.4
	1 or more	16.2	3.7	9.1	5.3	13.2	5.2	10.0	19.1
Health Insured:	Yes	13.8	4.8	7.9	5.9	13.7	5.1	10.2	15.0
	No	22.9	7.9	15.1	5.0	13.6	5.1	12.0	30.9
Welfare:	Receives	26.4	*	*	9.3	18.2	6.6	15.9	38.1
	Does not	14.5	5.3	8.8	5.2	12.8	5.0	9.7	16.2

*Low precision.
Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table 5.90 Percentage Reporting Heavy Alcohol Use in the Past Month, by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 12 and Older

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Total		5.1	0.9	2.8	6.9	4.0	3.4	4.7	5.3
Gender:	Female	2.0	0.2	0.8	1.7	1.2	1.3	1.8	2.1
	Male	8.6	1.8	5.2	11.6	7.3	5.9	8.1	8.8
Age:	12 to 17	1.6	0.4	0.4	2.3	0.7	1.4	0.7	1.8
	18 to 25	10.9	1.6	6.8	7.9	7.0	6.6	5.2	12.9
	26 to 34	7.1	1.4	3.4	8.2	6.7	4.1	7.0	7.4
	35 and older	3.8	0.7	2.3	7.3	3.0	2.5	4.6	3.7
Region:	Northeast	5.2	0.6	0.7	8.8	3.9	2.9	4.2	5.7
	North Central	5.6	0.6	*	6.2	4.9	2.6	4.2	5.9
	South	4.8	0.8	3.5	8.0	3.9	2.8	4.9	4.8
	West	5.0	1.2	*	6.4	4.0	4.1	5.0	5.2
Density:	MSA > 1 million	4.8	0.9	3.0	6.1	3.8	2.6	4.6	5.2
	Other MSA	5.3	1.2	*	7.5	4.8	5.3	5.5	5.3
	Not in MSA	5.5	*	*	10.3	*	4.8	3.4	5.7
Interview:	Spanish	5.1	*	3.9	6.2	2.3	2.8	*	*
	English	5.2	1.0	2.2	7.2	4.2	3.6	4.7	5.3
Family Income:	<$20,000	6.2	1.6	4.7	7.9	3.7	4.1	5.4	6.5
	$20-40,000	5.0	0.8	2.7	7.2	4.7	3.5	3.8	5.3
	>$40,000	4.5	0.8	1.5	5.3	4.1	2.4	4.0	4.7
Health Insured:	Yes	4.6	1.0	2.1	6.4	3.6	3.1	4.0	4.7
	No	8.6	0.5	5.1	7.7	5.8	4.0	7.5	9.9
Welfare:	Receives	6.0	*	*	7.9	2.6	3.9	5.3	7.0
	Does not	5.1	1.0	2.7	6.8	4.3	3.4	4.5	5.3

Note: Heavy use is defined as drinking five or more drinks per occasion on 5 or more days in the past 30 days.
*Low precision.
Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table 5.91 Percentage Reporting Heavy Alcohol Use in the Past Month, by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 12 to 17

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Total		1.6	0.4	0.4	2.3	0.7	1.4	0.7	1.8
Region:	Northeast	1.2	*	*	*	1.0	*	0.8	1.3
	North Central	1.8	*	*	1.0	*	*	0.6	2.1
	South	1.7	0.1	0.7	3.3	*	0.1	0.9	1.9
	West	1.4	*	*	1.7	*	2.4	0.3	1.4
Density:	MSA > 1 million	1.2	0.6	0.5	1.9	0.9	1.1	0.5	1.4
	Other MSA	1.9	*	*	3.0	*	1.2	0.9	2.1
	Not in MSA	1.9	*	*	2.6	*	*	1.3	1.9
Interview:	Spanish	0.2	*	*	0.2	*	0.1	*	*
	English	1.6	0.4	0.3	2.6	0.7	1.6	0.7	1.8
Family Income:	<$20,000	1.6	0.0	0.5	2.3	0.2	1.3	0.8	2.0
	$20-40,000	2.0	*	*	2.1	*	1.2	1.0	2.4
	>$40,000	1.4	*	*	2.6	*	1.8	0.4	1.5
School Dropout:	Yes	6.2	*	*	6.8	*	*	*	7.6
	No	1.5	0.4	0.3	2.1	0.7	1.3	0.7	1.7
Family:	Mother/Father	1.3	0.0	0.4	1.8	1.1	0.9	0.4	1.4
	Other	2.1	*	0.5	3.3	0.2	2.2	1.0	2.6
Health Insured:	Yes	1.6	0.4	0.3	2.3	0.8	1.5	0.8	1.8
	No	1.6	*	0.8	2.3	*	1.1	0.7	1.8
Welfare:	Receives	1.8	*	*	3.4	*	*	0.9	2.6
	Does not	1.6	0.0	0.3	2.2	0.8	1.6	0.7	1.8

Note: Heavy use is defined as drinking five or more drinks per occasion on 5 or more days in the past 30 days.
*Low precision.
Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table 5.92 Percentage Reporting Heavy Alcohol Use in the Past Month, by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 18 and Older

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Total		5.5	1.0	3.0	7.7	4.6	3.7	5.3	5.7
Gender:	Female	2.1	0.2	0.8	1.8	1.4	1.4	2.1	2.2
	Male	9.4	2.0	5.5	13.0	8.5	6.3	9.3	9.5
Age:	12 to 17	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	18 to 25	10.9	1.6	6.8	7.9	7.0	6.6	5.2	12.9
	26 to 34	7.1	1.4	3.4	8.2	6.7	4.1	7.0	7.4
	35 and older	3.8	0.7	2.3	7.3	3.0	2.5	4.6	3.7
Region:	Northeast	5.6	0.7	0.8	8.1	4.4	3.1	4.7	6.0
	North Central	6.1	0.7	*	7.3	5.7	2.9	4.8	6.3
	South	5.2	0.9	3.7	8.9	4.4	3.1	5.5	5.1
	West	5.4	1.2	*	7.2	4.6	4.3	5.8	5.6
Density:	MSA > 1 million	5.2	1.0	3.1	6.8	4.3	2.8	5.2	5.5
	Other MSA	5.7	1.5	*	8.4	5.8	5.9	6.2	5.6
	Not in MSA	6.0	*	*	12.3	*	5.1	3.7	6.1
Interview:	Spanish	5.4	*	4.0	6.6	2.4	3.0	*	*
	English	5.6	1.0	2.4	8.3	4.8	3.9	5.3	5.7
Family Income:	<$20,000	6.7	1.8	5.0	8.9	4.4	4.6	6.2	6.9
	$20-40,000	5.4	0.9	2.9	8.2	5.5	3.8	4.3	5.6
	>$40,000	4.8	0.8	1.6	5.7	4.4	2.5	4.4	5.0
Education:	0-8 Years	4.7	*	5.4	8.1	3.3	2.2	6.7	3.6
	9-11 Years	6.8	1.0	3.3	8.9	4.0	5.4	7.8	6.6
	12 Years	5.7	1.7	1.7	8.8	5.6	5.2	5.0	5.9
	>12 Years	5.2	0.7	2.6	5.1	4.7	2.4	3.6	5.6

(continued)

Table 5.92 Percentage Reporting Heavy Alcohol Use in the Past Month, by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 18 and Older (Continued)

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/ subclass									
Marital Status:	Married	3.9	0.6	1.4	6.1	3.4	2.2	4.2	3.9
	Widowed/div/sep	5.0	*	3.9	11.0	3.1	3.8	4.6	4.9
	Never married	11.2	2.0	7.9	9.9	8.3	7.3	7.1	13.1
Employment:	Employed	6.2	1.0	3.1	8.5	5.0	3.7	5.5	6.5
	Unemployed	1.4	*	1.0	12.8	7.2	5.7	10.6	12.2
	Not in labor force	3.0	0.2	3.1	3.8	2.9	3.0	2.7	3.1
Own Children:	None	6.5	1.5	4.6	9.3	7.2	5.1	6.6	6.6
	1 or more	4.2	0.6	1.3	6.6	2.5	2.4	3.7	4.3
Health Insured:	Yes	4.9	1.1	2.3	7.1	4.1	3.4	4.5	5.0
	No	9.4	0.5	5.4	8.7	6.5	4.3	8.6	10.7
Welfare:	Receives	7.0	*	*	9.4	3.3	4.7	6.6	7.7
	Does not	5.5	1.1	2.9	7.6	4.8	3.6	5.1	5.6

Note: Heavy use is defined as drinking five or more drinks per occasion on 5 or more days in the past 30 days.
N/A: Not applicable.
*Low precision.
Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Chapter 6 Conclusions

This report provides further evidence that substance abuse is a major health problem affecting racial/ethnic subgroups in the United States. Using data on eleven U.S. racial/ethnic subgroups from the combined 1991 through 1993 National Household Surveys on Drug Abuse, the report shows that there are substantial racial/ethnic differences in the prevalence of licit and illicit substance use, alcohol dependence, and need for illicit drug abuse treatment. Relative to the total U.S. household population aged 12 and older, Native Americans, Mexicans, Puerto Ricans, and non-Hispanic blacks have high prevalences of illicit drug use, heavy cigarette use, alcohol dependence, and need for illicit drug abuse treatment, while Asian/Pacific Islanders, Caribbeans, Central Americans, and Cubans have low prevalences. For example, the percentage of individuals aged 12 and older using any illicit drug in the past year equals about 20% among Native Americans, 13% among Mexicans, Puerto Ricans, and non-Hispanic blacks, and 8% or less among Asian/Pacific Islanders, Caribbeans, Central Americans, and Cubans, compared with about 12% in the total NHSDA surveyed population (Table 4.4). The effects of gender, age, and other sociodemographic variables on illicit drug use, heavy cigarette use, alcohol dependence, and need for illicit drug abuse treatment are generally similar across racial/ethnic subgroups. Within each racial/ethnic subgroup, those with the highest prevalences tend to be males, young adults aged 18 to 25, and socioeconomically disadvantaged families and individuals.

This report describes but does not explain racial/ethnic differences in substance use, alcohol dependence, and need for illicit drug abuse treatment. A number of alternative explanations—focusing on such explanatory factors as relative socioeconomic disadvantage, discrimination, and the values and traditions of specific racial/ethnic subgroups—are discussed in the research literature. The detailed analyses of Chapter 5 suggested that measures of socioeconomic disadvantage and other sociodemographic covariates did not fully account for racial/ethnic differences in substance use, because racial/ethnic differences within socioeconomic subclasses are generally similar to racial/ethnic differences in the total surveyed population. Even so, more refined measurements of socioeconomic status and race/ethnicity together with multivariate statistical modeling techniques (see discussion below) might show that the relative degrees of socioeconomic disadvantage of racial/ethnic subgroups account for a large part of racial/ethnic differences in substance use. Unfortunately, the different dimensions of socioeconomic status are difficult to measure finely enough to definitively test the hypothesis of socioeconomic disadvantage. Even a sample as large as that of the combined 1991-1993 NHSDAs might not suffice to model the complex interactions between the dimensions of socioeconomic status and race/ethnicity.

Although the reasons for racial/ethnic differences in substance use and drug-related outcomes are poorly understood, some policy implications of this report's findings seem clear: Decision-makers should be aware of racial/ethnic differences in the prevalence of substance use when decisions are made to allocate resources for substance abuse prevention and treatment. Resources might be effectively targeted to racial/ethnic subgroups that have high prevalences relative to the total U.S. population. Within each racial/ethnic subgroup, prevention and treatment resources might be targeted to those subclasses of individuals and families that tend to have the highest prevalence of substance use.

Regardless of racial/ethnic subgroup, individuals residing in the West or in metropolitan areas with populations greater than 1 million, individuals with no health insurance coverage, unemployed individuals, individuals with 9 to 11 years of schooling, and never-married individuals have relatively high prevalences of illicit drug use. Moreover, regardless of racial/ethnic subgroup, adolescents who dropped out of school or who reside in households with fewer than two biological parents have relatively high prevalences of past-year use of cigarettes, alcohol, and illicit drugs. To the extent that the use of English rather than of Spanish in the NHSDA interview gauges acculturation in American society, the results of this report also suggest that relatively acculturated Hispanics, such as those who have lived in the U.S. long enough to become fluent in English, are in greater need of illicit drug abuse prevention and treatment services than less acculturated Hispanics.

The descriptive results presented in this report have value mainly because the large sample size of the combined 1991 through 1993 NHSDAs permits an analysis of behavioral differences among racial/ethnic categories that are more refined than the usual distinction among Hispanics, non-Hispanic whites, non-Hispanic blacks, and others. Yet the advance of research on racial/ethnic differences in substance use will also depend on in-depth epidemiological studies, especially longitudinal or panel surveys and surveys targeting high-risk individuals within specific racial/ethnic categories. Longitudinal studies will be needed to ascertain how racial/ethnic differences affect substance use behavior at each stage of individual and familial life cycles. Surveys of high-risk individuals will be needed to find out how racial/ethnic differences interact with other factors associated with drug use, such as broken families, deviant peer groups, and dropping out of school at an early age.

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APPENDIX A. ESTIMATION, TESTING, AND SUPPRESSION OF LOW PRECISION ESTIMATES

The first four sections of this appendix discuss 1) sample weighting, 2) estimation of percentages (i.e., the method of statistical estimation used in Chapter 2-5), 3) statistical tests, and 4) suppression of estimates due to low precision. The final section presents standard errors for estimates presented in text tables of this report.

1. Sample weighting. The estimates of this report are based on sample survey data rather than on complete data for the population. This implies that the estimates must be weighted to take into account the complex sample design of the NHSDA. The basic sampling weights of each annual NHSDA are equal to the inverses of the probabilities of selection of sample respondents. In other words, the smaller a respondent's chance of entering the sample, the larger the weight of that respondent in the calculation of unbiased estimates for the target population. To obtain the final NHSDA weights, the basic sampling weights are adjusted to reflect household-level and individual-level nonresponse and further adjusted to ensure consistency with U.S. census population totals. (For details of NHSDA weighting, see SAMHSA, 1995c, Appendix D.)

The weight of the ith respondent, say w_i, can be interpreted as the number of persons in the NHSDA target population that are represented by the ith respondent. The sum of the weights over all respondents estimates the size of the total target population, that is,

$$\sum_i w_i = \textit{Size of target population}, \qquad (1)$$

where the summation is over all NHSDA respondents in the survey year.

Given the near equivalence of sample designs and sample sizes of the 1991, 1992, and 1993 surveys, weights for the combined 1991-1993 file were calculated by dividing the final weight on each annual file by three. This yields a total sum of weights equal to about 205 million for the more than 87,000 respondents age 12 and older in the combined 1991-1993 NHSDAs.

All estimates presented in this report are weighted to take into account the complex sampling design of the NHSDA. Thus, the estimates presented in this report are unbiased estimates for the U.S. civilian, noninstitutionalized population aged 12 and older or for specified subgroups of that target population.

2. Estimation of percentages. Chapters 2 through 5 present estimates of the percentages of persons age 12 and older in the total NHSDA target population and in racial/ethnic and other demographic subgroups who used substances during the preceding 12-month period. Let p_{ds} denote the estimated percentage using substance 'd' in subgroup 's.' Then

$$p_{ds} = 100 \frac{\sum_i w_i I_{di} I_{si}}{\sum_i w_i I_{si}}, \qquad (2)$$

where w_i is the weight of sample respondent 'i,' I_{si} is a 0-1 variable which takes on the value 1 if and only if respondent 'i' belongs to subgroup 's,' I_{di} is a 0-1 variable which takes on the value 1 if and only if respondent 'i' reported using substance 'd' during the preceding 12-month period, and the summations are over all respondents to the 1991-93 NHSDAs who were age 12-17.

3. Statistical tests. We used statistical tests to determine the statistical significance, at the .05 level, of

differences between subgroups that are reported in the text of this report. The statistical significance tests were standard difference-in-percentages tests, expressed as

$$Z = \frac{|p_1 - p_2|}{\sqrt{SE(p_1)^2 + SE(p_2)^2}}, \qquad (3)$$

where p_1 is the estimated percentage of the first subgroup (e.g., the estimated percentage using cigarettes in the past year), p_2 is the corresponding estimate of the second subgroup, $SE(p_1)$ is the standard error of p_1, and $SE(p_2)$ is the standard error of p_2.

The test statistic in (3) can be computed using the estimates reported in any text table and the standard errors reported in the corresponding standard error table of Appendix A. For example, Table 4.2 reports that the percentage of individuals age 12-to-17 using cigarettes in the past year equals 32.8 in Native American subgroup and 21.9 in the non-Hispanic white subgroup. Table A4.2 reports that the standard errors of these two rates are 6.2 and 0.6, respectively. From Eq. (3), it follows that Z = approximately 1.7, which is less than the critical value 1.96; hence, the difference between two percentages is *not* statistically significant at the .05 level. As a second example, Table 4.3 reports that, among males age 12 and older, the percentages using alcohol in the past year equal 65.0 among Central American Hispanics and 73.8 among Mexican Hispanics. From Table A4.3, the corresponding standard errors equal 2.4 and 1.0, respectively. From Eq. (3), Z = approximately 3.4, which is greater than 1.96; hence, the difference between the two percentages is statistically significant at the .05 level.

4. Suppression of low precision estimates. This report's estimates of the percentages of demographic subgroups using substances during the past year, dependent on alcohol, and in need of illicit drug abuse treatment were rounded to the nearest tenth of one percent and screened to confirm that they met a required level of statistical precision. Estimated percentages were considered to be of low precision if the standard error of the estimate was greater than 17.5 percent of the log transformation of the estimate. Low precision typically occurs for small subgroups when percents are close to zero or 100, but the large combined sample size of the 1991-93 NHSDAs ensured that few estimates had to be suppressed because of low precision. Estimates that were suppressed because of low precision are noted using asterisks in the text tables of this report.

5. Standard error tables. The appendix tables present standard errors for all estimates that are presented in the text of this report. Like the estimates themselves, the standard errors of these estimates fully take into account the complex sampling design of the NHSDA. In particular, the variance estimation software (SUDAAN) used the method of Taylor Series linearization to adjust all standard errors for correlations between observations due to the multistage sample design of NHSDA. (See SAMHSA, 1995c, Appendices C and D, for details of the NHSDA sample design and variance estimation methodology.)

The standard error tables have the same formats as the text tables for which they provide statistical documentation. The appendix table presenting the standard errors for estimates shown in a specified text table has the same number as the text table except for the prefix "A." For example, appendix table A3.1 presents the standard errors for the estimates shown in text table 3.1.

Table A2.1 Standard Errors for Measures of Substance Use, Dependence on Alcohol, and Need for Illicit Drug Abuse Treatment. Respondents Age 12 and Older, by Gender, 1991-1993

Outcome Measure	Males (n =39,469)		Females (n=48,446)		Total (n =87,915)	
	Population. (millions)[1]	%	Population (millions)[1]	%	Population (millions)[1]	%
Cigarette use- past year		0.6		0.5		0.4
Alcohol use- past year		0.7		0.7		0.6
Any illicit drug use- past year[2]		0.4		0.3		0.2
Marijuana use- past year		0.2		0.3		0.2
Cocaine- past year		0.2		0.1		0.1
Need for illicit drug abuse treatment		0.1		0.1		0.1
Alcohol- dependence		0.1		0.1		0.1
Heavy cigarette use		0.5		0.4		0.3
Heavy alcohol use		0.3		0.1		0.2

[1]The size of the target population for the combined 1991-93 data sets equals the average of the populations represented by the 1991, 1992, and 1993 NHSDAs. The target population comprises 205,257,000 persons, with 98,447,000 males and 106,810,000 females.
[2]Illicit drugs include marijuana, nonmedical use of psychotherapeutics (sedatives, tranquilizers, analgesics, and stimulants), cocaine (including crack), inhalants, hallucinogens, and heroin.

Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table A3.1 Standard Errors for Percentage Distribution of Racial/Ethnic Groups by Sociodemographic Variables. Respondents Aged 12 and Older, 1991-1993.

	Total	Native American	Asian/ Pacific Islander	Hispanic: Caribbean	Hispanic: Central American	Hispanic: Cuban	Hispanic: Mexican	Hispanic: Puerto Rican	Hispanic: South American	Hispanic: other	Non-Hispanic blacks	Non-Hispanic whites
Age												
12-17	0.2	1.5	0.9	1.6	0.8	0.6	0.4	0.8	1.2	0.8	0.3	0.2
18-25	0.3	2.1	1.1	1.8	1.3	1.0	0.5	0.8	1.9	1.0	0.4	0.3
26-34	0.3	2.5	1.5	2.6	1.6	1.9	0.6	1.0	2.1	2.0	0.5	0.3
35+	0.5	3.4	2.4	3.4	1.9	2.5	0.8	0.5	2.8	2.5	0.7	0.5
Gender												
Male	0.4	4.5	2.6	2.9	1.8	2.6	0.8	1.5	2.9	4.7	0.7	0.5
Female	0.4	4.5	2.6	2.9	1.8	2.6	0.8	1.5	2.9	4.7	0.7	0.5
Region												
Northeast	0.6	3.6	1.6	2.6	1.7	3.2	0.3	2.2	3.4	2.2	0.9	0.7
North Central	0.6	3.9	1.6	0.5	0.7	1.3	0.8	1.6	1.9	1.9	1.0	0.8
South	0.8	13.1	2.1	2.5	1.9	3.3	2.4	1.7	2.8	4.5	1.6	1.1
West	0.7	9.4	2.7	0.6	2.1	1.6	2.1	1.1	3.2	7.5	0.7	1.0
Population Density												
MSA >1million	1.2	7.6	3.0	2.7	1.6	3.1	2.2	2.5	3.0	7.9	2.4	1.4
Other MSA	2.2	8.6	3.3	2.6	1.5	2.8	2.1	2.8	2.8	6.3	2.7	2.5
Not in MSA	2.0	13.5	1.1	0.8	0.7	1.8	2.4	1.2	2.3	13.6	2.2	2.4
Interview												
Spanish	0.1	0.0	0.0	2.8	2.1	2.3	1.1	0.8	2.7	1.2	0.0	0.0
English	0.1	0.0	0.0	2.8	2.1	2.3	1.1	0.8	2.7	1.2	0.0	0.0
Family Income												
<$20,000	0.6	5.6	1.6	3.3	2.0	2.8	1.0	1.7	2.7	4.6	0.9	0.7
$20-40,000	0.3	4.0	2.0	3.7	1.6	2.6	0.6	1.1	2.0	2.6	0.5	0.4
>$40,000	0.6	8.2	2.4	2.4	2.1	2.9	1.1	1.8	2.7	4.4	0.9	0.7
Education (1)												
0-8 years	0.4	3.0	1.2	3.5	2.0	2.6	0.9	1.5	2.2	1.8	0.7	0.4
9-11 years	0.3	4.6	1.5	2.9	1.5	2.0	0.7	1.9	1.8	2.8	0.6	0.4
High school grad	0.5	4.3	3.2	2.8	2.0	2.8	0.7	1.8	3.3	3.7	0.7	0.6
> High school	0.7	5.0	3.1	2.1	2.1	2.5	0.9	1.9	3.4	5.4	0.9	0.8
Marital Status (1)												
Married	0.5	4.1	2.8	3.6	2.2	2.7	0.9	1.8	3.3	2.7	0.9	0.6
Widowed/div/sep.	0.4	3.7	2.5	2.4	1.3	1.9	0.7	1.4	2.3	2.0	0.8	0.4
Never married	0.4	2.3	1.9	2.6	1.9	1.6	0.6	1.2	2.7	1.6	0.6	0.4
Employment (1)												
Employed	0.5	6.3	2.3	3.2	2.2	2.7	0.9	1.8	3.4	3.3	0.8	0.6
Unemployed	0.2	3.5	1.5	1.4	1.4	1.0	0.5	0.9	1.9	2.5	0.5	0.2
Not in labor force	0.5	5.3	2.1	3.2	2.0	2.7	0.9	1.8	3.2	2.3	0.8	0.6

(Continued)

Table A3.1 Standard Errors for Percentage Distribution of Racial/Ethnic Groups by Sociodemographic Variables. Respondents Aged 12 and Older, 1991-1993. (continued)

	Total	Native American	Asian/ Pacific Islander	Hispanic: Caribbean	Hispanic: Central American	Hispanic: Cuban	Hispanic: Mexican	Hispanic: Puerto Rican	Hispanic: South American	Hispanic: other	Non-Hispanic blacks	Non-Hispanic whites
Own Children												
None	0.4	3.9	2.6	2.7	2.1	2.6	0.8	1.7	2.8	2.6	0.7	0.5
1 or more	0.4	3.9	2.6	2.7	2.1	2.6	0.8	1.7	2.8	2.6	0.7	0.5
Welfare Receipt												
Yes	0.2	3.8	1.0	2.1	0.7	1.7	0.4	1.4	1.2	1.4	0.6	0.2
No	0.2	3.8	1.0	2.1	0.7	1.7	0.4	1.4	1.2	1.4	0.6	0.2
Insurance Coverage												
Yes	0.3	5.2	1.5	4.2	1.9	2.0	0.9	1.1	2.4	1.7	0.6	0.4
No	0.3	5.2	1.5	4.2	1.9	2.0	0.9	1.1	2.4	1.7	0.6	0.4
Mean Number of People in Household	0.02	0.1	0.1	0.1	0.1	0.1	0.04	0.1	0.1	0.1	0.04	0.02

1 Education, employment and marital status are calculated using respondents aged 18 and older.
Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table A3.2 Standard Errors for Percentage Distribution of Racial/Ethnic Groups by Sociodemographic Variables. Respondents Aged 12-17, 1991-1993.

	Total	Native American	Asian/ Pacific Islander	Hispanic: Caribbean	Hispanic: Central American	Hispanic: Cuban	Hispanic: Mexican	Hispanic: Puerto Rican	Hispanic: South American	Hispanic: other	Non-Hispanic blacks	Non-Hispanic whites
Gender												
Male	0.5	7.5	3.2	5.4	3.4	3.9	1.5	2.7	5.0	5.2	1.1	0.7
Female	0.5	7.5	3.2	5.4	3.4	3.9	1.5	2.7	5.0	5.2	1.1	0.7
Region												
Northeast	0.7	4.2	2.6	2.1	3.5	4.3	0.3	3.3	4.6	3.8	0.9	1.0
North Central	0.8	6.1	2.5	0.4	2.2	3.3	1.3	2.5	2.5	1.1	1.2	1.1
South	0.9	14.2	2.7	1.5	3.0	4.7	2.7	2.2	4.8	5.2	1.8	1.4
West	0.7	10.0	4.0	1.5	3.6	2.9	2.4	1.7	3.0	8.1	1.0	1.1
Population Density												
MSA >1million	1.4	8.0	4.1	4.9	3.9	5.2	2.4	4.2	5.5	10.0	2.7	1.5
Other MSA	2.3	9.1	4.3	4.9	3.2	4.9	2.1	4.5	4.5	5.7	3.1	2.7
Not in MSA	2.0	14.0	1.6	0.0	2.7	2.4	2.8	1.5	4.4	14.4	2.5	2.5
Interview												
Spanish	0.1	0.0	0.0	3.8	2.7	2.0	1.2	0.8	2.1	1.3	0.0	0.0
English	0.1	0.0	0.0	3.8	2.7	2.0	1.2	0.8	2.1	1.3	0.0	0.0
Family Income												
<$20,000	0.8	7.4	3.1	4.9	3.3	3.8	1.7	2.5	4.5	6.3	1.3	0.9
$20-40,000	0.5	3.7	2.7	5.0	2.3	3.5	1.1	2.1	3.7	3.1	0.9	0.6
>$40,000	0.8	8.2	3.0	4.8	3.0	3.8	1.5	2.3	4.4	6.3	1.1	1.0
School Dropout												
Yes	0.2	4.2	1.0	1.4	1.2	1.0	0.6	0.6	1.2	2.6	0.3	0.2
No	0.2	4.2	1.0	1.4	1.2	1.0	0.6	0.6	1.2	2.6	0.3	0.2
Family												
Mother/Father	0.6	6.9	2.9	4.8	3.4	3.9	1.3	2.7	4.1	4.0	1.0	0.7
Other	0.6	6.9	2.9	4.8	3.4	3.9	1.3	2.7	4.1	4.0	1.0	0.7
Welfare Receipt												
Yes	0.4	6.2	2.1	4.2	1.4	3.2	1.1	3.0	2.0	1.5	1.0	0.4
No	0.4	6.2	2.1	4.2	1.4	3.2	1.1	3.0	2.0	1.5	1.0	0.4
Insurance Coverage												
Yes	0.5	8.0	1.9	3.9	3.4	3.2	1.3	1.8	3.8	3.0	1.1	0.6
No	0.5	8.0	1.9	3.9	3.4	3.2	1.3	1.8	3.8	3.0	1.1	0.6
Mean Number of People in Household	0.02	0.3	0.1	0.2	0.1	0.1	0.1	0.1	0.1	0.2	0.1	0.02

Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table A3.3 Standard Errors for Percentage Distribution of Racial/Ethnic Groups by Sociodemographic Variables. Respondents Aged 18-25, 1991-1993.

	Total	Native American	Asian/ Pacific Islander	Hispanic: Caribbean	Hispanic: Central American	Hispanic: Cuban	Hispanic: Mexican	Hispanic: Puerto Rican	Hispanic: South American	Hispanic: other	Non-Hispanic blacks	Non-Hispanic whites
Gender												
Male	0.7	7.7	3.4	5.9	3.1	4.1	1.4	3.2	5.9	5.1	1.2	0.8
Female	0.7	7.7	3.4	5.9	3.1	4.1	1.4	3.2	5.9	5.1	1.2	0.8
Region												
Northeast	1.0	1.6	2.6	5.8	3.4	3.3	0.4	3.1	5.4	3.0	1.1	1.3
North Central	0.9	6.1	2.8	0.5	1.0	1.6	1.0	2.6	2.4	3.4	1.2	1.2
South	1.1	11.9	2.4	5.7	3.9	4.2	2.4	2.2	5.7	4.7	1.9	1.6
West	0.9	9.1	3.6	1.9	3.7	2.5	2.2	0.9	5.6	8.0	1.1	1.2
Population Density												
MSA >1million	1.5	8.4	3.9	6.9	3.2	4.2	2.4	3.5	6.2	9.2	2.9	1.7
Other MSA	2.6	7.8	4.3	6.7	3.2	3.6	2.3	3.8	6.0	6.2	3.2	3.1
Not in MSA	2.5	12.3	2.0	3.1	0.3	2.5	2.4	2.2	2.8	13.4	2.9	3.1
Interview												
Spanish	0.1	0.0	0.0	5.4	3.8	2.8	1.6	1.0	3.9	1.3	0.0	0.0
English	0.1	0.0	0.0	5.4	3.8	2.8	1.6	1.0	3.9	1.3	0.0	0.0
Family Income												
<$20,000	1.0	3.6	3.6	6.0	3.4	4.6	1.5	3.5	6.9	6.1	1.5	1.3
$20-40,000	0.5	2.4	2.4	2.7	3.4	2.8	1.2	2.2	4.4	3.8	0.9	0.6
>$40,000	0.8	3.3	3.3	6.2	3.1	4.0	1.2	3.4	5.5	5.9	1.2	1.1
Education												
0-8 years	0.2	0.4	0.4	0.2	3.4	1.7	1.2	0.9	1.8	1.7	0.2	0.2
9-11 years	0.6	2.0	2.0	5.5	2.6	3.2	1.2	2.7	5.7	3.2	1.3	0.6
High school grad	0.7	2.8	2.8	5.1	3.7	4.5	1.2	3.1	5.6	5.4	1.2	0.9
> high school	1.0	3.4	3.4	6.6	2.8	3.7	1.4	2.4	6.9	4.7	1.2	1.1
Marital Status												
Married	0.7	1.9	1.9	4.6	3.9	3.4	1.3	2.4	5.6	4.2	0.7	1.0
Widowed/div/sep.	0.2	0.6	0.6	1.4	0.9	0.6	0.8	0.6	0.3	3.2	0.4	0.3
Never married	0.8	2.0	2.0	4.4	4.0	3.4	1.4	2.4	5.6	4.8	0.8	1.0
Employment												
Employed	0.7	3.5	3.5	6.2	3.0	4.0	1.4	3.3	6.3	4.0	1.4	0.9
Unemployed	0.4	1.1	1.1	5.8	1.8	2.7	0.8	1.9	4.8	2.5	0.9	0.5
Not in labor force	0.7	3.6	3.6	6.2	2.9	3.4	1.2	3.0	6.0	3.9	1.3	0.9
Own Children												
None	0.6	5.4	1.5	5.5	3.9	2.1	1.2	2.3	5.7	5.8	1.2	0.7
1 or more	0.6	5.4	1.5	5.5	3.9	2.1	1.2	2.3	5.7	5.8	1.2	0.7

(Continued)

Table A3.3 Standard Errors for Percentage Distribution of Racial/Ethnic Groups by Sociodemographic Variables. Respondents Aged 18-25, 1991-1993. (continued)

	Total	Native American	Asian/ Pacific Islander	Hispanic: Caribbean	Hispanic: Central American	Hispanic: Cuban	Hispanic: Mexican	Hispanic: Puerto Rican	Hispanic: South American	Hispanic: other	Non-Hispanic blacks	Non-Hispanic whites
Welfare Receipt												
Yes	0.4	4.7	2.2	4.8	0.8	1.3	0.7	2.4	1.3	3.2	1.0	0.4
No	0.4	4.7	2.2	4.8	0.8	1.3	0.7	2.4	1.3	3.2	1.0	0.4
Insurance Coverage												
Yes	0.7	6.7	3.1	5.7	3.3	4.5	1.4	2.9	6.1	3.8	1.2	0.9
No	0.7	6.7	3.1	5.7	3.3	4.5	1.4	2.9	6.1	3.8	1.2	0.9
Mean Number of People in Household	0.03	0.2	0.1	0.3	0.1	0.1	0.1	0.1	0.2	0.1	0.1	0.03

Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table A3.4 Standard Errors for Percentage Distribution of Racial/Ethnic Groups by Sociodemographic Variables. Respondents Aged 26-34, 1991-1993.

	Total	Native American	Asian/ Pacific Islander	Hispanic: Caribbean	Hispanic: Central American	Hispanic: Cuban	Hispanic: Mexican	Hispanic: Puerto Rican	Hispanic: South American	Hispanic: other	Non-Hispanic blacks	Non-Hispanic whites
Gender												
Male	0.5	6.4	3.5	4.4	3.0	3.8	1.3	2.6	4.7	5.5	1.1	0.6
Female	0.5	6.4	3.5	4.4	3.0	3.8	1.3	2.6	4.7	5.5	1.1	0.6
Region												
Northeast	0.8	2.3	3.7	3.4	2.8	4.3	0.3	2.9	5.2	3.9	1.1	1.0
North Central	0.8	5.7	2.0	0.9	1.3	1.6	0.9	2.0	1.1	2.8	1.4	1.0
South	0.9	16.1	3.4	3.0	3.0	5.1	2.4	2.0	4.3	2.9	2.0	1.2
West	0.8	12.4	4.1	1.6	3.6	3.2	2.2	1.8	3.7	6.8	0.8	1.0
Population Density												
MSA >1million	1.4	9.9	4.4	4.2	3.0	2.6	2.5	3.4	3.6	7.8	2.7	1.6
Other MSA	2.2	11.4	4.7	3.8	2.8	2.6	2.2	3.6	3.7	7.1	2.8	2.6
Not in MSA	1.7	17.0	1.5	2.0	1.2	0.0	2.5	2.3	0.2	13.2	2.2	2.1
Interview												
Spanish	0.1	0.0	0.0	3.2	3.5	3.1	1.6	1.3	2.8	2.0	0.0	0.0
English	0.1	0.0	0.0	3.2	3.5	3.1	1.6	1.3	2.8	2.0	0.0	0.0
Family Income												
<$20,000	0.7	8.1	3.2	4.7	3.2	3.1	1.6	2.8	3.1	5.3	1.2	0.9
$20-40,000	0.5	2.3	2.3	4.4	3.0	1.5	1.1	2.2	4.5	4.5	0.9	0.7
>$40,000	0.7	8.4	3.4	4.2	3.4	3.4	1.6	3.2	4.4	6.2	1.3	0.9
Education												
0-8 years	0.2	2.2	0.8	4.2	2.7	0.7	1.3	1.0	1.1	1.7	0.2	0.3
9-11 years	0.4	5.2	0.8	3.8	2.3	1.9	1.0	2.1	1.7	2.9	0.8	0.5
High school grad	0.6	7.2	3.0	4.9	3.1	3.3	1.2	2.9	4.0	6.8	1.1	0.8
> high school	0.8	6.0	3.6	4.4	3.3	3.6	1.2	3.1	4.3	5.3	1.3	1.0
Marital Status												
Married	0.6	6.6	3.4	5.5	3.0	4.0	1.2	3.0	4.6	3.9	1.2	0.7
Widowed/div/sep.	0.4	6.6	1.7	4.7	1.5	2.3	0.6	1.7	2.6	2.0	0.7	0.5
Never married	0.5	3.4	3.4	4.0	2.9	4.2	1.0	2.5	4.2	3.9	1.1	0.6
Employment												
Employed	0.5	7.6	3.0	4.5	3.1	3.0	1.2	2.5	4.3	3.9	0.9	0.7
Unemployed	0.3	5.4	1.2	3.1	1.0	1.4	0.7	1.7	2.3	3.2	0.7	0.4
Not in labor force	0.4	9.9	2.8	3.8	3.1	2.6	1.0	1.9	2.9	2.4	0.7	0.5
Own Children												
None	0.6	7.2	3.3	4.9	3.4	5.3	1.2	2.6	4.2	4.7	1.2	0.8
1 or more	0.6	7.2	3.3	4.9	3.4	5.3	1.2	2.6	4.2	4.7	1.2	0.8

(Continued)

Table A3.4 Standard Errors for Percentage Distribution of Racial/Ethnic Groups by Sociodemographic Variables. Respondents Aged 26-34, 1991-1993. (continued)

	Total	Native American	Asian/ Pacific Islander	Hispanic: Caribbean	Hispanic: Central American	Hispanic: Cuban	Hispanic: Mexican	Hispanic: Puerto Rican	Hispanic: South American	Hispanic: other	Non-Hispanic blacks	Non-Hispanic whites
Welfare Receipt												
Yes	0.3	6.5	1.6	3.6	1.6	1.5	0.7	1.9	2.1	2.2	0.8	0.3
No	0.3	6.5	1.6	3.6	1.6	1.5	0.7	1.9	2.1	2.2	0.8	0.3
Insurance Coverage												
Yes	0.5	5.3	1.7	6.2	2.9	3.5	1.4	2.4	3.4	4.7	0.9	0.6
No	0.5	5.3	1.7	6.2	2.9	3.5	1.4	2.4	3.4	4.7	0.9	0.6
Mean Number of People in Household	0.02	0.2	0.1	1.2	0.2	0.1	0.1	0.1	0.1	0.2	0.1	0.02

Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table A3.5 Standard Errors for Percentage Distribution of Racial/Ethnic Groups by Sociodemographic Variables. Respondents Aged 35 and Older, 1991-1993.

	Total	Native American	Asian/ Pacific Islander	Hispanic: Caribbean	Hispanic: Central American	Hispanic: Cuban	Hispanic: Mexican	Hispanic: Puerto Rican	Hispanic: South American	Hispanic: other	Non-Hispanic blacks	Non-Hispanic whites
Gender												
Male	0.7	6.7	4.5	5.3	3.5	3.8	1.4	2.8	5.6	5.8	1.2	0.9
Female	0.7	6.7	4.5	5.3	3.5	3.8	1.4	2.8	5.6	5.8	1.2	0.9
Region												
Northeast	0.7	5.9	2.5	4.6	2.9	4.7	0.6	3.1	5.3	2.4	1.2	0.8
North Central	0.8	4.1	2.5	0.9	1.0	1.8	1.2	2.2	3.2	2.4	1.4	1.0
South	1.0	13.7	3.0	4.6	3.0	4.7	2.7	2.7	4.6	6.0	1.8	1.3
West	0.8	10.9	4.1	0.4	3.4	2.0	2.5	1.8	5.3	8.5	0.7	1.1
Population Density												
MSA >1million	1.3	8.8	3.9	3.3	2.4	4.5	2.6	2.8	4.7	7.9	2.5	1.4
Other MSA	2.2	10.1	3.9	3.1	2.3	4.0	2.5	3.0	4.4	7.3	2.7	2.5
Not in MSA	2.1	13.9	1.3	0.9	1.3	2.6	2.7	1.5	4.0	14.0	2.2	2.5
Interview												
Spanish	0.1	0.0	0.1	4.6	3.5	3.2	1.7	1.4	4.8	1.7	0.0	0.0
English	0.1	0.0	0.1	4.6	3.5	3.2	1.7	1.4	4.8	1.7	0.0	0.0
Family Income												
<$20,000	0.7	6.6	2.5	5.0	3.9	4.0	1.7	2.7	5.1	5.2	1.2	0.8
$20-40,000	0.5	6.6	3.8	6.5	3.3	3.8	1.2	1.9	2.8	3.8	0.8	0.5
>$40,000	0.7	11.0	4.3	5.4	3.9	3.9	1.9	2.7	5.2	4.8	1.3	0.9
Education												
0-8 years	0.5	4.5	2.1	5.2	3.3	3.5	1.8	2.6	3.9	2.6	1.2	0.6
9-11 years	0.5	6.6	2.5	3.8	2.7	2.7	1.1	2.8	2.4	4.1	1.0	0.6
High school grad	0.7	6.3	4.9	4.5	2.9	3.6	1.1	2.5	4.9	3.8	1.1	0.9
> high school	0.8	7.2	4.4	2.4	3.6	3.4	1.5	2.9	4.7	6.2	1.0	1.0
Marital Status												
Married	0.6	5.9	4.5	4.6	3.2	3.1	1.4	2.5	4.6	3.9	1.4	0.7
Widowed/div/sep.	0.5	6.1	4.0	3.5	2.9	2.7	1.2	2.3	3.8	2.9	1.3	0.6
never married	0.3	1.0	1.2	2.3	2.3	1.2	0.6	1.1	2.1	1.9	0.7	0.3
Employment												
Employed	0.7	9.1	3.3	5.4	3.8	3.6	1.6	2.8	5.3	4.5	1.2	0.8
Unemployed	0.2	5.3	2.4	3.0	3.0	1.4	0.8	1.2	2.8	3.6	0.6	0.3
Not in labor force	0.7	6.4	2.8	5.4	3.0	3.7	1.5	2.9	5.2	3.3	1.1	0.8
Own Children												
None	0.7	6.8	4.4	4.0	3.1	3.4	1.6	2.9	4.8	4.5	1.2	0.8
1 or more	0.7	6.8	4.4	4.0	3.1	3.4	1.6	2.9	4.8	4.5	1.2	0.8

(continued)

Table A3.5 Standard Errors for Percentage Distribution of Racial/Ethnic Groups by Sociodemographic Variables. Respondents Aged 35 and Older, 1991-1993 (continued)

	Total	Native American	Asian/ Pacific Islander	Hispanic: Caribbean	Hispanic: Central American	Hispanic: Cuban	Hispanic: Mexican	Hispanic: Puerto Rican	Hispanic: South American	Hispanic: other	Non-Hispanic blacks	Non-Hispanic whites
Welfare Receipt												
Yes	0.2	5.3	1.4	2.7	1.3	2.6	0.7	1.8	1.9	2.0	0.7	0.2
No	0.2	5.3	1.4	2.7	1.3	2.6	0.7	1.8	1.9	2.0	0.7	0.2
Insurance Coverage												
Yes	0.4	9.1	2.5	7.1	3.7	2.5	1.5	1.6	4.1	2.0	0.8	0.5
No	0.4	9.1	2.5	7.1	3.7	2.5	1.5	1.6	4.1	2.0	0.8	0.5
Mean Number of People in Household	0.02	0.2	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.04	0.02

Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table A4.1 Percentage of Persons 12 and Older Using Cigarettes, Alcohol, Any Illicit Drugs, Marijuana, and Cocaine in the Past Year, Percentage in Need of Illicit Drug Abuse Treatment, Percentage Reporting Dependence on Alcohol, Percentage Reporting Heavy Cigarette Use in the Past Month, and Percentage Reporting Heavy Alcohol Use in the Past Month. By Race/Ethnicity, 1991-1993.

STANDARD ERRORS

	Measure								
	Cig use-past year	Alc use-past year	Any illicit drug-past year	Marij -past year	Coc -past year	Need drug abuse treat-ment	Alc depen-dence	Heavy cig use-past month	Heavy alc use-past month
Race/ethnicity									
Total surveyed population	0.4	0.6	0.2	0.2	0.1	0.1	0.1	0.3	0.2
Native American	6.1	4.3	3.5	3.0	2.4	3.3	2.1	4.2	1.1
Asian/Pacific Islander	1.7	2.6	0.9	0.7	0.5	0.5	0.6	0.9	0.3
Hispanic- Caribbean	3.1	2.7	1.3	1.3	0.6	0.6	0.8	1.0	1.2
Hispanic-Central America	1.4	2.0	0.8	0.5	0.3	0.4	0.6	0.5	0.5
Hispanic-Cuba	2.2	2.4	1.5	1.4	0.3	0.7	0.2	1.1	0.5
Hispanic-Mexico	0.8	0.8	0.5	0.4	0.3	0.2	0.4	0.5	0.4
Hispanic-Puerto Rico	1.4	2.0	0.9	0.9	0.5	0.4	0.4	1.0	0.6
Hispanic-South America	2.7	2.5	1.8	1.7	0.4	0.5	0.6	1.8	0.7
Hispanic-other	1.7	2.6	1.3	1.2	0.5	1.0	0.6	1.1	0.7
Non-Hispanic black	0.7	0.8	0.5	0.4	0.2	0.2	0.2	0.4	0.3
Non-Hispanic white	0.5	0.7	0.3	0.2	0.1	0.1	0.1	0.4	0.2

Note: Heavy cigarette use is defined as smoking a pack or more per day during the past 30 days. Heavy alcohol use is defined as drinking five or more drinks per occasion on 5 or more days during the past 30 days.

Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table A4.2 Percentage Using Alcohol in the Past Year, by Race/Ethnicity Gender, and Age (12-17, 18-25, 26-34, 35 and Older), 1991-1993

STANDARD ERRORS

	Group						
	Total	Female	Male	Age 12-17	Age 18-25	Age 26-34	Age 35+
Race/ethnicity							
Total U.S.	0.6	0.7	0.7	0.5	0.6	0.5	0.8
Native American	4.3	5.6	5.7	6.9	7.7	4.6	6.9
Asian/Pac Islander	2.6	3.6	2.9	3.1	3.0	3.4	4.3
Hispanic-Caribbean	2.7	3.3	3.3	4.8	5.3	4.2	4.2
Hispanic-C America	2.0	2.9	2.4	3.0	4.0	3.4	3.5
Hispanic-Cuba	2.4	3.7	3.4	3.3	4.6	3.3	3.4
Hispanic-Mexico	0.8	1.1	1.0	1.4	1.3	1.1	1.5
Hispanic-Puerto Rico	2.0	2.4	2.8	2.2	3.6	2.6	3.3
Hispanic-S America	2.5	3.8	2.8	4.9	5.7	2.9	4.4
Hispanic-other	2.6	3.4	3.3	4.2	3.7	3.4	3.8
Non-Hispanic black	0.8	1.0	1.1	1.0	1.1	0.9	1.2
Non-Hispanic white	0.7	0.9	0.8	0.7	0.8	0.7	1.0

Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table A4.3 Percentage Using Any Illicit Drugs in the Past Year, by Race/Ethnicity, Gender, and Age (12-17, 18-25, 26-34, 35 and Older), 1991-1993

STANDARD ERRORS

	Group						
	Total	Female	Male	Age 12-17	Age 18-25	Age 26-34	Age 35+
Race/ethnicity							
Total U.S.	0.2	0.3	0.4	0.4	0.7	0.4	0.3
Native American	3.5	5.0	2.9	5.9	6.7	6.2	4.7
Asian/Pac Islander	0.9	1.0	1.7	2.0	2.6	2.6	0.6
Hispanic-Caribbean	1.3	1.9	2.7	2.7	4.5	2.7	1.6
Hispanic-C America	0.8	0.9	1.5	2.1	1.9	1.4	1.0
Hispanic-Cuba	1.5	1.3	2.2	2.7	3.7	6.1	0.7
Hispanic-Mexico	0.5	0.6	0.8	1.0	1.1	0.8	0.8
Hispanic-Puerto Rico	0.9	0.9	1.8	1.9	2.6	2.5	1.2
Hispanic-S America	1.8	1.2	3.1	3.1	6.1	2.4	1.4
Hispanic-other	1.3	1.9	1.5	2.6	3.8	2.8	1.7
Non-Hispanic black	0.5	0.6	0.7	0.8	1.2	1.0	0.6
Non-Hispanic white	0.3	0.3	0.5	0.5	1.0	0.5	0.3

Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table A4.4 Percentage Using Marijuana in the Past Year, by Race/Ethnicity, Gender, and Age (12-17, 18-25, 26-34, 35 and Older), 1991-1993

STANDARD ERRORS

	Group						
	Total	Female	Male	Age 12-17	Age 18-25	Age 26-34	Age 35+
Race/ethnicity							
Total U.S.	0.2	0.2	0.3	0.3	0.6	0.4	0.2
Native American	3.0	4.3	2.7	4.2	5.4	6.0	4.1
Asian/Pac Islander	0.7	0.5	1.4	1.7	2.5	2.3	0.5
Hispanic-Caribbean	1.3	1.4	2.7	2.6	4.4	1.4	1.9
Hispanic-C America	0.5	0.5	0.9	1.8	1.6	0.8	0.0
Hispanic-Cuba	1.4	1.2	2.1	2.5	3.6	6.3	0.4
Hispanic-Mexico	0.4	0.4	0.6	0.9	1.1	0.7	0.7
Hispanic-Puerto Rico	0.9	0.8	1.8	1.8	2.4	2.3	1.3
Hispanic-S America	1.7	1.0	3.0	2.7	6.0	2.2	1.3
Hispanic-other	1.2	1.9	1.4	2.8	4.0	2.8	1.6
Non-Hispanic black	0.4	0.5	0.6	0.7	1.2	1.0	0.5
Non-Hispanic white	0.2	0.2	0.4	0.4	0.8	0.5	0.2

Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table A4.5 Percentage Using Cocaine in the Past Year, by Race/Ethnicity, Gender, and Age (12-17, 18-25, 26-34, 35 and Older), 1991-1993

STANDARD ERRORS

	Group						
	Total	Female	Male	Age 12-17	Age 18-25	Age 26-34	Age 35+
Race/ethnicity							
Total U.S.	0.1	0.1	0.2	0.1	0.3	0.2	0.1
Native American	2.4	4.0	1.3	0.0	4.2	2.3	3.6
Asian/Pac Islander	0.5	0.2	1.1	0.3	1.8	1.6	0.5
Hispanic-Caribbean	0.6	1.0	0.6	0.1	1.5	2.1	0.4
Hispanic-C America	0.3	0.1	0.8	0.4	1.2	0.7	0.1
Hispanic-Cuba	0.3	0.3	0.7	0.4	0.9	1.6	0.2
Hispanic-Mexico	0.3	0.3	0.5	0.6	0.6	0.4	0.5
Hispanic-Puerto Rico	0.5	0.4	1.1	0.4	1.4	1.9	0.4
Hispanic-S America	0.4	0.6	0.8	1.4	1.6	1.2	0.7
Hispanic-other	0.5	0.7	0.7	0.7	3.6	1.7	0.0
Non-Hispanic black	0.2	0.2	0.4	0.2	0.5	0.6	0.3
Non-Hispanic white	0.1	0.1	0.2	0.1	0.4	0.3	0.1

Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table A4.6 Percentage in Need of Illicit Drug Abuse Treatment, by Race/Ethnicity, Gender, and Age (12-17, 18-25, 26-34, 35 and Older), 1991-1993

STANDARD ERRORS

	Group						
	Total	Female	Male	Age 12-17	Age 18-25	Age 26-34	Age 35+
Race/ethnicity							
Total U.S.	0.1	0.1	0.1	0.2	0.3	0.2	0.1
Native American	2.4	3.5	2.7	0.7	3.9	2.9	3.9
Asian/Pac Islander	0.5	0.6	0.8	0.6	0.7	2.1	0.4
Hispanic-Caribbean	0.6	1.1	0.7	1.5	0.9	2.2	0.4
Hispanic-C America	0.4	0.3	0.8	0.9	0.7	0.8	0.6
Hispanic-Cuba	0.7	0.3	1.5	0.9	3.3	3.4	0.2
Hispanic-Mexico	0.2	0.3	0.4	0.7	0.5	0.5	0.4
Hispanic-Puerto Rico	0.4	0.5	0.7	0.9	1.2	1.2	0.6
Hispanic-S America	0.5	0.7	0.6	1.4	1.6	1.2	0.3
Hispanic-other	1.0	1.6	0.8	1.2	3.2	1.0	1.5
Non-Hispanic black	0.2	0.3	0.4	0.4	0.5	0.5	0.3
Non-Hispanic white	0.1	0.1	0.2	0.2	0.3	0.2	0.1

Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table A4.7 Percentage in Need of Illicit Drug Abuse Treatment, by Race/Ethnicity, Gender, and Age (12-17, 18-25, 26-34, 35 and older), 1991-1993

STANDARD ERRORS

	Group						
	Total	Female	Male	Age 12-17	Age 18-25	Age 26-34	Age 35+
Race/ethnicity							
Total surveyed population	0.1	0.1	0.2	0.2	0.3	0.2	0.1
Native American	3.3	4.9	2.8	0.7	4.0	2.9	5.1
Asian/Pac Islander	0.5	0.6	0.8	0.6	0.8	2.1	0.4
Hispanic-Caribbean	0.6	1.1	0.7	1.5	0.9	2.2	0.4
Hispanic-C America	0.4	0.3	0.8	0.9	0.7	0.8	0.6
Hispanic-Cuba	0.7	0.3	1.5	1.0	3.3	3.3	0.2
Hispanic-Mexico	0.2	0.3	0.4	0.7	0.5	0.5	0.4
Hispanic-Puerto Rico	0.4	0.5	0.7	0.8	1.4	1.2	0.6
Hispanic-S America	0.5	0.7	0.6	1.4	1.6	1.2	0.3
Hispanic-other	1.0	1.6	0.9	1.2	3.4	1.7	1.5
Non-Hispanic black	0.2	0.3	0.4	0.4	0.6	0.6	0.4
Non-Hispanic white	0.1	0.1	0.2	0.2	0.4	0.2	0.1

Source: Office of Applied Studies, SAMHSA, National Opinion Research Center, 1991-93.

Table A4.8 Percentage Reporting Dependence on Alcohol, by Race/Ethnicity, Gender, and Age (12-17, 18-25, 26-34, 35 and Older),1991-1993

STANDARD ERRORS

	Group						
	Total	Female	Male	Age 12-17	Age 18-25	Age 26-34	Age 35+
Race/ethnicity							
Total surveyed population	0.1	0.1	0.2	0.2	0.4	0.2	0.1
Native American	2.1	3.1	2.3	1.9	6.4	3.0	2.4
Asian/Pac Islander	0.6	0.2	1.2	0.3	0.7	1.6	0.8
Hispanic-Caribbean	0.8	0.2	1.7	0.0	3.7	0.8	1.1
Hispanic-C America	0.6	0.4	1.3	1.0	1.6	1.5	0.5
Hispanic-Cuba	0.2	0.2	0.3	0.2	0.8	0.6	0.2
Hispanic-Mexico	0.4	0.3	0.8	0.5	0.7	1.0	0.5
Hispanic-Puerto Rico	0.4	0.3	0.8	0.5	1.2	1.1	0.6
Hispanic-S America	0.6	0.8	0.8	1.0	1.8	1.3	0.7
Hispanic-other	0.6	0.5	1.1	1.4	2.2	2.3	0.8
Non-Hispanic black	0.2	0.2	0.5	0.3	0.5	0.4	0.4
Non-Hispanic white	0.1	0.1	0.2	0.2	0.5	0.3	0.2

Source: Office of Applied Studies, SAMHSA, National Opinion Research Center, 1991-93.

Table A4.9 Percentage Reporting Heavy Alcohol Use in the Past Month, by Race/Ethnicity, Gender, and Age (12-17, 18-25, 26-34, 35 and Older), 1991-1993

STANDARD ERRORS

	Group						
	Total	Female	Male	Age 12-17	Age 18-25	Age 26-34	Age 35+
Race/ethnicity							
Total U.S.	0.2	0.1	0.3	0.1	0.5	0.3	0.2
Amer Ind/Native	1.1	0.9	2.2	4.0	2.5	2.9	1.8
Asian/Pac Islander	0.3	0.1	0.6	0.3	0.5	0.6	0.4
Hispanic-Caribbean	1.2	1.0	2.2	1.5	1.7	2.1	2.3
Hispanic-C America	0.5	0.1	1.1	0.3	1.1	0.6	0.8
Hispanic-Cuba	0.5	0.3	1.1	0.2	2.7	0.9	0.6
Hispanic-Mexico	0.4	0.2	0.7	0.4	0.7	0.8	0.8
Hispanic-Puerto Rico	0.6	0.4	1.2	0.4	1.8	1.7	0.7
Hispanic-S America	0.7	0.4	1.4	1.7	2.6	1.1	1.0
Hispanic-other	0.7	0.8	1.4	0.7	3.4	2.3	0.9
Non-Hispanic black	0.3	0.2	0.7	0.2	0.6	0.5	0.5
Non-Hispanic white	0.2	0.2	0.4	0.2	0.6	0.4	0.3

Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table A5.10 Percentage Using Cigarettes in the Past Year,
by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 12 and Older

STANDARD ERRORS

		Race/Ethnicity							
					Hispanic			Non-	Non-
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Puerto Rico	Hispanic other	Hispanic black	Hispanic white
Variable/subclass									
Total		0.4	1.7	2.2	0.8	1.4	1.1	0.7	0.5
Gender:	Female	0.5	2.3	3.2	0.9	2.0	1.4	0.8	0.6
	Male	0.6	3.3	2.8	1.1	2.3	1.7	1.0	0.7
Age:	12 to 17	0.5	2.0	2.4	1.1	1.9	1.6	0.7	0.6
	18 to 25	0.7	3.0	3.7	1.5	3.1	2.3	1.1	0.9
	26 to 34	0.6	3.1	3.7	1.3	2.7	2.1	1.1	0.7
	35 and older	0.6	3.1	3.2	1.5	2.5	1.6	1.1	0.7
Region:	Northeast	1.0	1.9	4.3	4.9	1.8	2.4	1.5	1.2
	North Central	0.9	3.1	6.9	2.8	4.2	3.9	1.5	1.0
	South	0.7	5.2	2.7	1.6	3.6	2.5	0.9	0.9
	West	0.7	2.7	10.0	1.0	4.4	1.5	1.6	1.0
Density:	MSA > 1 million	0.5	2.0	1.9	0.8	1.5	1.3	0.8	0.7
	Other MSA	0.8	3.7	10.5	1.9	3.2	3.1	1.6	0.9
	Not in MSA	0.9	8.4	18.4	3.0	7.8	1.9	1.7	0.9
Interview:	Spanish	0.8	0.0	2.5	1.0	3.5	1.8	10.6	11.0
	English	0.4	1.7	3.1	1.1	1.5	1.3	0.7	0.5
Family Income:	<$20,000	0.7	3.4	2.7	1.1	2.1	1.6	0.9	1.0
	$20-40,000	0.9	3.9	7.2	1.5	3.7	2.4	1.7	1.1
	>$40,000	0.5	2.5	3.2	1.4	2.7	2.1	1.2	0.6
Health Insured:	Yes	0.4	2.0	2.7	1.2	1.9	1.4	0.7	0.5
	No	0.9	5.1	3.1	1.4	2.7	1.7	1.6	1.2
Welfare:	Receives	1.2	6.7	11.8	2.0	3.1	3.6	1.4	2.3
	Does not	0.4	1.9	1.9	0.8	1.6	1.1	0.7	0.5

Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table A5.11 Percentage Using Cigarettes in the Past Year,
by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 12 to 17
STANDARD ERRORS

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Total		0.5	2.0	2.4	1.1	1.9	1.6	0.7	0.6
Region:	Northeast	1.5	7.0	9.2	13.4	2.2	2.6	1.5	1.9
	North Central	0.9	2.4	10.4	4.2	5.6	12.0	1.6	1.1
	South	0.8	3.2	1.9	1.6	5.6	3.4	0.9	1.1
	West	0.6	2.8	8.2	1.5	6.7	2.2	2.6	1.1
Density:	MSA > 1 million	0.6	2.0	2.1	1.2	2.3	1.7	0.6	0.9
	Other MSA	1.0	4.3	9.5	1.6	3.7	5.7	1.7	1.3
	Not in MSA	1.0	16.9	0.0	6.5	11.7	3.3	1.8	1.2
Interview:	Spanish	1.8	0.0	1.3	2.3	6.8	1.0	0.0	0.0
	English	0.5	2.0	2.6	1.2	1.9	1.7	0.7	0.6
Family Income:	<$20,000	0.8	4.5	3.1	1.5	2.5	2.3	0.9	1.3
	$20-40,000	1.0	3.4	6.6	2.1	3.1	3.9	1.7	1.4
	>$40,000	0.7	2.5	2.8	2.5	4.4	2.8	1.3	0.8
School Dropout:	Yes	3.4	2.2	16.8	6.1	12.2	12.2	5.0	4.8
	No	0.5	2.1	2.4	1.1	1.9	1.6	0.6	0.6
Family:	Mother/Father	0.6	2.2	3.4	1.4	2.3	2.0	0.9	0.7
	Other	0.7	5.5	2.9	1.8	3.0	2.5	0.9	1.1
Health Insured:	Yes	0.5	2.1	2.8	1.4	2.1	1.9	0.7	0.7
	No	1.2	7.4	4.2	1.9	4.6	2.7	1.7	2.0
Welfare:	Receives	1.5	7.9	5.0	3.1	3.3	4.4	1.4	3.5
	Does not	0.5	2.1	2.6	1.2	2.3	1.6	0.7	0.6

Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table A5.12 Percentage Using Cigarettes in the Past Year,
by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 18 and Older
STANDARD ERRORS

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Total		0.4	1.9	2.4	0.9	1.7	1.2	0.8	0.5
Gender:	Female	0.5	2.5	3.4	1.0	2.3	1.6	1.0	0.6
	Male	0.7	3.8	3.0	1.2	2.7	1.9	1.2	0.8
Age:	12 to 17	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	18 to 25	0.7	3.0	3.7	1.5	3.1	2.3	1.1	0.9
	26 to 34	0.6	3.1	3.7	1.3	2.7	2.1	1.1	0.7
	35 and older	0.6	3.1	3.2	1.5	2.5	1.6	1.1	0.7
Region:	Northeast	1.1	1.9	4.7	5.3	2.1	2.7	1.7	1.3
	North Central	0.9	3.5	8.1	3.4	4.9	4.3	1.8	1.0
	South	0.8	5.8	2.8	1.8	4.0	2.9	1.0	0.9
	West	0.8	2.9	11.0	1.1	4.9	1.5	1.6	1.0
Density:	MSA > 1 million	0.6	2.2	2.0	0.9	1.8	1.5	1.0	0.8
	Other MSA	0.9	4.4	11.5	2.1	3.9	3.4	1.9	1.0
	Not in MSA	1.0	9.2	19.5	3.9	9.6	2.1	2.0	1.0
Interview:	Spanish	0.8	0.0	2.5	1.1	3.6	1.9	13.1	11.1
	English	0.5	1.9	3.4	1.3	1.8	1.5	0.8	0.5
Family Income:	<$20,000	0.8	3.7	2.9	1.3	2.4	1.8	1.0	1.0
	$20-40,000	1.0	4.5	7.8	1.7	4.1	2.6	1.9	1.2
	>$40,000	0.6	2.8	3.4	1.5	3.0	2.3	1.3	0.7
Education:	0-8 Years	1.8	5.9	3.8	1.4	4.4	2.2	2.8	2.8
	9-11 Years	1.2	11.0	8.9	1.9	3.7	3.7	1.9	1.6
	12 Years	0.7	4.1	4.1	1.8	3.0	2.3	1.2	0.8
	>12 Years	0.6	2.3	3.4	1.4	3.3	2.5	1.1	0.7

(continued)

Table A5.12 Percentage Using Cigarettes in the Past Year,
by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 18 and Older
STANDARD ERRORS (Continued)

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Marital Status:	Married	0.6	2.9	3.3	1.1	2.8	1.7	1.2	0.7
	Widowed/div/sep	0.9	8.0	4.3	2.7	3.4	3.2	1.5	1.2
	Never married	0.6	3.0	4.5	1.4	2.5	2.6	1.1	0.8
Employment:	Employed	0.6	2.5	2.4	1.1	2.4	1.6	0.9	0.7
	Unemployed	1.4	8.3	9.1	2.9	4.4	4.5	2.1	2.0
	Not in labor force	0.8	2.4	5.7	1.7	3.0	1.8	1.4	1.0
Own Children:	None	0.6	2.4	2.9	1.2	2.2	1.9	1.0	0.7
	1 or more	0.7	3.3	3.8	1.3	2.6	1.6	1.1	0.9
Health Insured:	Yes	0.5	2.2	2.9	1.3	2.2	1.6	0.8	0.6
	No	0.9	5.6	3.4	1.5	3.0	1.9	1.8	1.3
Welfare:	Receives	1.4	7.9	10.9	2.4	3.6	4.2	1.8	2.5
	Does not	0.5	2.1	2.0	0.9	1.8	1.3	0.8	0.5

N/A: Not applicable.
Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table A5.20 Percentage Using Alcohol in the Past Year, by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 12 and Older
STANDARD ERRORS

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Total		0.6	2.6	2.4	0.8	2.0	1.3	0.8	0.7
Gender:	Female	0.7	3.6	3.7	1.1	2.4	1.9	1.0	0.9
	Male	0.7	2.9	3.4	1.0	2.8	1.6	1.1	0.8
Age:	12 to 17	0.5	3.1	3.3	1.4	2.2	2.4	1.0	0.7
	18 to 25	0.6	3.0	4.6	1.3	3.6	2.8	1.1	0.8
	26 to 34	0.5	3.4	3.3	1.1	2.6	1.8	0.9	0.7
	35 and older	0.8	4.3	3.4	1.5	3.3	2.4	1.2	1.0
Region:	Northeast	1.0	3.6	4.8	3.6	2.6	2.4	1.6	1.2
	North Central	1.3	5.1	10.7	2.2	5.1	6.7	1.7	1.5
	South	1.0	5.2	2.8	1.3	4.0	2.4	1.1	1.3
	West	1.0	4.3	6.4	1.1	5.4	2.1	2.0	1.2
Density:	MSA > 1 million	0.6	3.0	2.4	1.0	1.9	1.4	0.8	0.8
	Other MSA	1.0	5.5	10.5	1.6	5.1	4.0	1.7	1.1
	Not in MSA	1.8	8.4	24.4	3.0	13.2	3.1	2.1	1.9
Interview:	Spanish	1.2	0.0	2.7	1.5	5.6	2.2	10.2	16.3
	English	0.6	2.6	3.4	1.0	2.1	1.7	0.8	0.7
Family Income:	<$20,000	0.8	3.8	3.4	1.1	2.7	2.4	1.1	1.2
	$20-40,000	1.1	6.3	7.2	1.8	3.9	2.5	1.6	1.3
	>$40,000	0.6	3.4	3.2	1.4	3.0	2.2	1.3	0.7
Health Insured:	Yes	0.6	2.9	2.8	1.0	2.1	1.6	0.8	0.7
	No	0.9	4.5	3.9	1.1	3.3	2.3	1.5	1.5
Welfare:	Receives	1.2	8.2	14.7	2.3	3.4	4.8	1.6	2.4
	Does not	0.6	2.6	2.3	0.9	2.2	1.5	0.8	0.7

Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table A5.21 Percentage Using Alcohol in the Past Year,
by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 12 to 17
STANDARD ERRORS

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Total		0.5	3.1	3.3	1.4	2.2	2.4	1.0	0.7
Region:	Northeast	1.2	7.2	7.8	11.6	2.2	4.2	2.1	1.5
	North Central	1.2	6.7	17.9	4.4	6.1	12.6	2.5	1.4
	South	0.8	6.9	3.2	2.0	6.0	3.9	1.4	1.1
	West	1.0	4.6	12.9	2.0	8.9	4.0	3.2	1.4
Density:	MSA > 1 million	0.8	3.4	3.0	1.7	2.3	2.4	1.1	1.1
	Other MSA	1.1	6.6	12.2	2.5	4.7	7.4	2.1	1.3
	Not in MSA	1.1	16.9	0.0	5.2	14.5	5.9	3.2	1.3
Interview:	Spanish	2.1	0.0	6.3	2.5	3.6	3.9	0.0	0.0
	English	0.5	3.1	3.7	1.5	2.2	2.5	1.0	0.7
Family Income:	<$20,000	1.0	6.1	4.5	1.8	3.2	3.0	1.3	1.6
	$20-40,000	1.2	7.0	7.8	2.9	5.5	5.3	2.3	1.6
	>$40,000	0.8	3.8	5.2	2.5	4.3	4.8	2.0	1.0
School Dropout:	Yes	3.5	4.5	15.2	5.3	9.2	7.6	7.0	5.1
	No	0.5	3.1	3.4	1.4	2.2	2.3	1.0	0.7
Family:	Mother/Father	0.7	3.2	4.1	1.5	3.2	3.1	1.5	0.8
	Other	0.8	7.1	5.6	2.4	3.4	3.1	1.2	1.2
Health Insured:	Yes	0.6	3.2	3.5	1.8	2.5	2.9	1.1	0.7
	No	1.4	8.0	7.8	1.9	4.3	3.5	2.7	2.2
Welfare:	Receives	1.7	5.5	8.5	3.9	3.9	5.5	1.9	3.6
	Does not	0.6	3.4	3.4	1.4	2.5	2.6	1.2	0.7

Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table A5.22 Percentage Using Alcohol in the Past Year,
by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 18 and Older
STANDARD ERRORS

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Total		0.6	2.9	2.6	0.9	2.2	1.6	0.8	0.8
Gender:	Female	0.7	4.0	3.9	1.3	2.7	2.1	1.1	0.9
	Male	0.8	3.3	3.6	1.0	3.2	1.8	1.3	0.9
Age:	12 to 17	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	18 to 25	0.6	3.0	4.6	1.3	3.6	2.8	1.1	0.8
	26 to 34	0.5	3.4	3.3	1.1	2.6	1.8	0.9	0.7
	35 and older	0.8	4.3	3.4	1.5	3.3	2.4	1.2	1.0
Region:	Northeast	1.1	4.2	4.8	4.0	2.9	2.7	1.6	1.3
	North Central	1.5	6.0	7.3	2.5	5.8	7.7	1.9	1.7
	South	1.1	5.7	3.0	1.5	4.7	2.7	1.2	1.4
	West	1.0	4.8	6.6	1.1	6.3	2.4	2.2	1.3
Density:	MSA > 1 million	0.6	3.3	2.5	1.1	2.2	1.7	0.9	0.9
	Other MSA	1.0	6.7	11.7	1.7	5.2	4.4	1.9	1.2
	Not in MSA	2.0	8.9	25.5	3.6	15.0	4.0	2.1	2.1
Interview:	Spanish	1.3	0.0	2.7	1.6	5.8	2.4	12.5	16.5
	English	0.6	2.9	3.7	1.0	2.3	2.1	0.8	0.8
Family Income:	<$20,000	0.9	4.0	3.7	1.1	3.2	2.7	1.2	1.2
	$20-40,000	1.2	7.0	7.7	2.0	4.4	2.9	1.8	1.5
	>$40,000	0.7	3.7	3.3	1.5	3.3	2.4	1.4	0.8
Education:	0-8 Years	2.0	14.3	6.6	1.7	5.6	4.1	3.4	2.9
	9-11 Years	1.3	10.2	9.6	1.4	4.2	3.6	1.8	1.8
	12 Years	0.9	5.7	4.1	1.3	3.5	2.3	1.3	1.1
	>12 Years	0.6	3.0	2.7	1.6	2.7	2.7	1.1	0.7

(continued)

Table A5.22 Percentage Using Alcohol in the Past Year, by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 18 and Older
STANDARD ERRORS (Continued)

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Marital Status:	Married	0.8	3.7	3.8	1.2	3.1	2.1	1.4	1.0
	Widowed/div/sep	1.0	9.5	5.1	2.4	4.3	3.5	1.6	1.3
	Never married	0.5	2.6	3.7	1.2	2.9	2.5	1.0	0.7
Employment:	Employed	0.6	3.9	2.7	0.9	2.7	1.8	1.0	0.8
	Unemployed	1.4	12.3	7.4	2.4	4.6	3.7	2.1	2.1
	Not in labor force	1.1	4.2	5.7	2.0	3.8	3.9	1.6	1.4
Own Children:	None	0.8	3.8	3.3	1.3	2.9	2.1	1.2	1.0
	1 or more	0.7	4.1	3.7	1.2	2.7	2.0	1.1	1.0
Health Insured:	Yes	0.7	3.3	2.9	1.0	2.3	1.9	0.9	0.8
	No	1.0	4.9	4.2	1.3	3.6	2.5	1.6	1.6
Welfare:	Receives	1.5	10.9	17.6	2.7	4.2	5.5	2.1	2.7
	Does not	0.6	2.9	2.4	0.9	2.4	1.7	0.8	0.8

N/A: Not applicable.
Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table A5.30 Percentage Using Illicit Drugs in the Past Year,
by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 12 and Older
STANDARD ERRORS

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Total		0.2	0.9	1.5	0.5	0.9	0.7	0.5	0.3
Gender:	Female	0.3	1.0	1.3	0.6	0.9	0.9	0.6	0.3
	Male	0.4	1.7	2.2	0.8	1.8	1.1	0.7	0.5
Age:	12 to 17	0.4	2.0	2.7	1.0	1.9	1.7	0.8	0.5
	18 to 25	0.7	2.6	3.7	1.1	2.6	2.1	1.2	1.0
	26 to 34	0.4	2.6	6.1	0.8	2.5	1.3	1.0	0.5
	35 and older	0.3	0.6	0.7	0.8	1.2	0.9	0.6	0.3
Region:	Northeast	0.5	2.4	2.5	5.6	1.0	1.1	1.1	0.6
	North Central	0.5	1.6	9.4	1.8	2.2	2.3	1.2	0.5
	South	0.5	1.0	1.9	0.8	3.1	2.0	0.6	0.6
	West	0.5	1.4	3.1	0.7	4.3	0.9	1.6	0.7
Density:	MSA > 1 million	0.3	1.0	1.6	0.6	0.9	0.9	0.6	0.4
	Other MSA	0.5	1.9	2.3	1.0	3.2	1.6	1.1	0.6
	Not in MSA	0.6	6.2	9.2	2.4	5.9	1.3	1.5	0.7
Interview:	Spanish	0.4	0.0	1.3	0.4	1.5	0.8	6.8	8.3
	English	0.3	0.9	2.2	0.7	1.0	0.9	0.5	0.3
Family Income:	<$20,000	0.4	2.0	1.5	0.6	1.4	0.9	0.6	0.6
	$20-40,000	0.5	1.8	1.9	1.1	2.0	1.0	1.0	0.6
	>$40,000	0.3	1.1	2.5	1.0	1.6	1.4	0.6	0.4
Health Insured:	Yes	0.3	1.0	1.1	0.7	1.1	0.8	0.5	0.3
	No	0.6	1.6	3.3	0.8	1.9	1.2	1.1	1.0
Welfare:	Receives	0.9	2.1	5.5	1.6	1.9	2.3	1.4	1.5
	Does not	0.3	0.9	1.5	0.5	1.1	0.7	0.5	0.3

Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table A5.31 Percentage Using Illicit Drugs in the Past Year,
by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 12 to 17
STANDARD ERRORS

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Total		0.4	2.0	2.7	1.0	1.9	1.7	0.8	0.5
Region:	Northeast	1.0	3.1	10.9	13.3	1.9	2.0	1.7	1.3
	North Central	0.8	1.7	10.4	4.8	6.4	3.6	1.8	0.8
	South	0.7	2.5	1.5	1.8	3.5	3.0	0.9	0.8
	West	0.9	3.4	10.1	1.1	9.7	2.4	3.1	1.6
Density:	MSA > 1 million	0.6	2.0	1.7	1.0	2.3	1.6	0.9	0.9
	Other MSA	0.7	4.1	4.4	1.8	3.0	4.9	1.6	0.9
	Not in MSA	1.0	17.0	0.0	5.8	9.0	3.4	2.2	1.0
Interview:	Spanish	0.8	0.0	2.0	0.9	2.0	1.3	0.0	0.0
	English	0.4	2.0	3.0	1.2	2.0	1.8	0.8	0.5
Family Income:	<$20,000	0.7	5.1	5.8	1.5	3.0	2.7	0.9	1.2
	$20-40,000	0.9	3.2	3.1	1.9	3.1	2.7	1.8	1.1
	>$40,000	0.5	1.9	3.1	2.0	3.3	2.5	1.5	0.7
School Dropout:	Yes	3.1	2.2	7.6	5.9	9.7	8.0	5.5	4.6
	No	0.4	2.0	2.7	1.0	1.9	1.7	0.8	0.5
Family:	Mother/Father	0.5	2.0	4.2	1.2	2.9	2.6	1.1	0.6
	Other	0.6	6.0	2.9	1.8	2.6	1.8	1.0	0.9
Health Insured:	Yes	0.4	2.0	3.4	1.3	2.1	2.0	0.8	0.6
	No	1.1	7.4	3.5	1.5	4.1	2.1	1.6	1.6
Welfare:	Receives	1.4	4.4	2.2	3.3	3.0	4.2	1.8	2.9
	Does not	0.4	2.0	3.0	1.1	2.6	1.9	0.9	0.5

Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table A5.32 Percentage Using Illicit Drugs in the Past Year,
by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 18 and Older
STANDARD ERRORS

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Total		0.3	0.9	1.6	0.5	1.0	0.7	0.5	0.3
Gender:	Female	0.3	1.0	1.3	0.6	1.0	0.9	0.6	0.4
	Male	0.4	1.7	2.3	0.8	2.1	1.1	0.8	0.5
Age:	12 to 17	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	18 to 25	0.7	2.6	3.7	1.1	2.6	2.1	1.2	1.0
	26 to 34	0.4	2.6	6.1	0.8	2.5	1.3	1.0	0.5
	35 and older	0.3	0.6	0.7	0.8	1.2	0.9	0.6	0.3
Region:	Northeast	0.5	2.7	2.5	6.3	1.1	1.2	1.2	0.6
	North Central	0.5	1.8	11.0	1.7	2.0	2.6	1.3	0.5
	South	0.5	1.1	2.0	0.9	3.3	2.1	0.7	0.6
	West	0.5	1.4	3.2	0.7	4.3	1.0	1.7	0.7
Density:	MSA > 1 million	0.3	1.0	1.8	0.7	1.0	0.9	0.6	0.4
	Other MSA	0.6	2.0	2.5	1.0	3.7	1.6	1.2	0.6
	Not in MSA	0.7	6.3	7.8	2.0	6.7	1.6	1.6	0.7
Interview:	Spanish	0.4	0.0	1.3	0.5	1.6	0.8	8.2	8.4
	English	0.3	0.9	2.4	0.7	1.1	1.0	0.5	0.3
Family Income:	<$20,000	0.5	2.0	1.5	0.7	1.6	1.0	0.7	0.6
	$20-40,000	0.5	2.0	2.0	1.2	2.3	1.2	1.1	0.6
	>$40,000	0.4	1.2	2.6	1.1	1.7	1.5	0.7	0.4
Education:	0-8 Years	0.4	2.4	0.9	0.6	1.0	0.9	0.9	0.6
	9-11 Years	0.6	3.2	3.4	1.0	2.2	2.1	1.2	0.8
	12 Years	0.4	2.0	3.0	1.3	2.3	1.2	0.9	0.4
	>12 Years	0.4	1.3	2.2	1.7	1.8	1.6	0.7	0.4

(continued)

Table A5.32 Percentage Using Illicit Drugs in the Past Year,
by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 18 and Older
STANDARD ERRORS (Continued)

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Marital Status:	Married	0.3	0.7	1.3	0.6	1.4	0.5	0.7	0.3
	Widowed/div/sep	0.5	2.5	1.4	1.8	1.6	2.5	0.7	0.6
	Never married	0.6	2.3	4.7	1.3	2.3	1.7	0.9	0.8
Employment:	Employed	0.4	1.1	2.2	0.7	1.3	1.0	0.6	0.4
	Unemployed	1.0	4.4	7.4	2.2	3.7	2.9	1.6	1.6
	Not in labor force	0.3	1.7	1.1	0.7	1.9	0.8	0.7	0.4
Own Children:	None	0.4	1.7	2.8	1.0	1.9	1.3	0.7	0.4
	1 or more	0.3	0.5	1.4	0.7	1.1	1.0	0.7	0.4
Health Insured:	Yes	0.3	1.1	1.2	0.7	1.2	1.0	0.5	0.3
	No	0.7	1.6	3.5	0.9	2.1	1.3	1.2	1.1
Welfare:	Receives	1.0	1.7	6.4	1.9	2.3	2.8	1.6	1.7
	Does not	0.3	1.0	1.6	0.5	1.1	0.8	0.5	0.3

N/A: Not applicable.
Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table A5.40 Percentage Using Marijuana in the Past Year,
by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 12 and Older
STANDARD ERRORS

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Total		0.2	0.7	1.4	0.4	0.9	0.6	0.4	0.2
Gender:	Female	0.2	0.5	1.2	0.4	0.8	0.9	0.5	0.2
	Male	0.3	1.4	2.1	0.6	1.8	1.0	0.6	0.4
Age:	12 to 17	0.3	1.7	2.5	0.9	1.8	1.6	0.7	0.4
	18 to 25	0.7	2.5	3.6	1.1	2.4	2.1	1.2	0.8
	26 to 34	0.4	2.3	6.3	0.7	2.3	1.2	1.0	0.5
	35 and older	0.2	0.5	0.4	0.7	1.3	0.8	0.5	0.2
Region:	Northeast	0.4	1.4	2.5	2.5	0.9	1.0	1.0	0.5
	North Central	0.4	1.4	6.2	1.7	2.0	2.1	1.1	0.4
	South	0.4	0.8	1.8	0.7	3.2	1.9	0.5	0.4
	West	0.4	1.2	2.9	0.5	4.6	0.7	1.4	0.6
Density:	MSA > 1 million	0.2	0.8	1.6	0.5	0.8	0.8	0.5	0.3
	Other MSA	0.4	1.7	2.4	0.8	2.8	1.3	1.0	0.5
	Not in MSA	0.5	2.4	9.2	2.1	5.9	1.3	1.1	0.5
Interview:	Spanish	0.2	0.0	0.7	0.3	1.1	0.4	6.8	8.3
	English	0.2	0.7	2.2	0.6	0.9	0.8	0.4	0.2
Family Income:	<$20,000	0.4	1.7	1.5	0.5	1.3	0.9	0.6	0.4
	$20-40,000	0.4	1.7	1.4	1.0	1.6	0.9	0.9	0.4
	>$40,000	0.3	0.9	2.4	0.8	1.4	1.2	0.5	0.3
Health Insured:	Yes	0.2	0.8	1.0	0.6	1.0	0.8	0.4	0.2
	No	0.5	1.6	3.4	0.7	1.9	1.1	1.0	0.9
Welfare:	Receives	0.8	1.6	3.3	1.5	1.6	2.3	1.3	1.4
	Does not	0.2	0.7	1.5	0.4	1.1	0.6	0.4	0.2

Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table A5.41 Percentage Using Marijuana in the Past Year,
by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 12 to 17
STANDARD ERRORS

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Total		0.3	1.7	2.5	0.9	1.8	1.6	0.7	0.4
Region:	Northeast	0.7	0.7	10.9	13.3	1.9	1.8	1.5	1.0
	North Central	0.7	1.6	10.1	3.8	6.3	1.8	1.6	0.8
	South	0.5	0.2	1.3	1.7	2.3	1.7	0.9	0.6
	West	0.8	3.2	5.3	1.0	10.1	2.5	2.3	1.1
Density:	MSA > 1 million	0.5	2.0	1.2	0.8	2.3	1.3	0.7	0.8
	Other MSA	0.7	3.8	4.4	1.8	2.3	4.2	1.4	0.8
	Not in MSA	0.7	8.4	0.0	5.0	9.0	4.0	1.4	0.7
Interview:	Spanish	0.5	0.0	1.4	0.6	2.0	0.5	0.0	0.0
	English	0.3	1.7	2.8	1.1	1.9	1.7	0.7	0.4
Family Income:	<$20,000	0.6	5.0	5.6	1.2	2.7	2.8	0.8	0.9
	$20-40,000	0.7	1.5	2.3	1.7	3.0	2.1	1.6	1.0
	>$40,000	0.5	1.1	2.8	1.9	3.3	2.3	1.3	0.5
School Dropout:	Yes	2.9	2.2	6.9	5.8	10.0	8.0	4.8	4.5
	No	0.3	1.8	2.6	0.9	1.8	1.6	0.7	0.4
Family:	Mother/Father	0.4	1.5	4.2	1.1	2.8	2.6	1.0	0.5
	Other	0.6	5.5	1.8	1.5	2.5	1.6	0.9	0.8
Health Insured:	Yes	0.3	1.7	3.3	1.1	2.0	2.1	0.8	0.4
	No	1.0	7.4	1.4	1.3	4.1	1.4	1.2	1.5
Welfare:	Receives	1.3	3.8	1.6	2.5	3.1	4.0	1.6	2.7
	Does not	0.4	1.7	2.9	1.0	2.4	1.8	0.7	0.4

Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table A5.42 Percentage Using Marijauna in the Past Year,
by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 18 and Older
STANDARD ERRORS

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Total		0.2	0.8	1.5	0.4	1.0	0.7	0.5	0.3
Gender:	Female	0.2	0.5	1.3	0.4	0.8	0.9	0.5	0.3
	Male	0.3	1.5	2.2	0.7	2.0	1.0	0.7	0.4
Age:	12 to 17	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	18 to 25	0.7	2.5	3.6	1.1	2.4	2.1	1.2	0.8
	26 to 34	0.4	2.3	6.3	0.7	2.3	1.2	1.0	0.5
	35 and older	0.2	0.5	0.4	0.7	1.3	0.8	0.5	0.2
Region:	Northeast	0.4	1.6	2.5	2.1	1.0	1.2	1.1	0.6
	North Central	0.4	1.6	7.0	1.7	1.8	2.3	1.2	0.4
	South	0.4	0.9	2.0	0.7	3.4	2.1	0.6	0.5
	West	0.4	1.2	3.1	0.5	4.6	0.8	1.5	0.6
Density:	MSA > 1 million	0.3	0.9	1.7	0.5	0.9	0.9	0.6	0.4
	Other MSA	0.4	1.9	2.5	0.8	3.1	1.4	1.1	0.5
	Not in MSA	0.5	2.7	7.8	1.8	6.6	1.5	1.2	0.6
Interview:	Spanish	0.2	0.0	0.7	0.3	1.1	0.4	8.2	8.4
	English	0.2	0.8	2.4	0.6	1.0	0.9	0.5	0.3
Family income:	<$20,000	0.4	1.7	1.5	0.6	1.5	1.0	0.7	0.5
	$20-40,000	0.4	1.9	1.5	1.2	1.8	1.0	1.0	0.5
	>$40,000	0.3	1.0	2.5	0.9	1.5	1.4	0.6	0.4
Education:	0-8 Years	0.4	2.4	0.9	0.4	0.8	0.7	0.5	0.6
	9-11 Years	0.5	3.0	2.9	0.9	2.0	1.8	1.1	0.6
	12 Years	0.3	1.9	2.8	1.2	2.2	1.3	0.8	0.4
	>12 Years	0.3	1.0	2.1	1.2	1.7	1.5	0.6	0.4

(continued)

Table A5.42 Percentage Using Marijauna in the Past Year,
by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 18 and Older
STANDARD ERRORS (Continued)

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Marital Status:	Married	0.2	0.7	1.1	0.5	1.3	0.4	0.6	0.2
	Widowed/div/sep	0.4	0.1	1.2	1.4	1.6	2.4	0.6	0.4
	Never married	0.5	2.0	4.9	1.2	2.4	1.7	0.9	0.7
Employment:	Employed	0.3	0.8	2.1	0.5	1.2	0.9	0.6	0.4
	Unemployed	0.9	4.4	5.8	1.7	3.0	2.8	1.4	1.4
	Not in labor force	0.3	1.7	1.1	0.4	1.8	0.8	0.7	0.3
Own Children:	None	0.3	1.4	2.7	0.8	1.8	1.1	0.6	0.3
	1 or more	0.3	0.4	1.1	0.6	1.0	1.0	0.6	0.3
Health Insured:	Yes	0.2	0.9	1.1	0.6	1.1	0.9	0.5	0.3
	No	0.6	1.5	3.6	0.7	2.1	1.2	1.1	0.9
Welfare:	Receives	0.9	1.4	3.8	1.8	1.8	2.9	1.5	1.5
	Does not	0.2	0.8	1.6	0.4	1.1	0.7	0.4	0.3

N/A: Not applicable.
Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table A5.50 Percentage Using Cocaine in the Past Year,
by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 12 and Older
STANDARD ERRORS

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Total		0.1	0.5	0.3	0.3	0.5	0.2	0.2	0.1
Gender:	Female	0.1	0.2	0.3	0.3	0.4	0.3	0.2	0.1
	Male	0.2	1.1	0.7	0.5	1.1	0.4	0.4	0.2
Age:	12 to 17	0.1	0.3	0.4	0.6	0.4	0.4	0.2	0.1
	18 to 25	0.3	1.8	0.9	0.6	1.4	1.0	0.5	0.4
	26 to 34	0.2	1.6	1.6	0.4	1.9	0.8	0.6	0.3
	35 and older	0.1	0.5	0.2	0.5	0.4	0.2	0.3	0.1
Region:	Northeast	0.2	0.1	1.0	1.7	0.7	0.4	0.5	0.2
	North Central	0.2	0.1	0.0	0.7	1.0	1.3	0.4	0.2
	South	0.1	0.2	0.3	0.4	0.9	0.4	0.3	0.2
	West	0.2	1.1	0.5	0.4	2.6	0.4	1.0	0.3
Density:	MSA > 1 million	0.1	0.6	0.3	0.3	0.4	0.3	0.3	0.2
	Other MSA	0.2	1.3	1.6	0.5	1.8	0.8	0.4	0.2
	Not in MSA	0.2	0.7	0.0	1.0	5.1	0.6	0.5	0.2
Interview:	Spanish	0.2	0.0	0.4	0.3	1.3	0.5	6.8	0.0
	English	0.1	0.5	0.4	0.4	0.6	0.3	0.2	0.1
Family Income:	<$20,000	0.2	1.0	0.7	0.3	0.8	0.4	0.3	0.2
	$20-40,000	0.2	1.6	0.5	0.8	1.1	0.6	0.6	0.2
	>$40,000	0.1	0.6	0.5	0.5	0.7	0.4	0.3	0.1
Health Insured:	Yes	0.1	0.6	0.2	0.3	0.5	0.3	0.2	0.1
	No	0.3	1.1	1.1	0.5	1.5	0.5	0.5	0.5
Welfare:	Receives	0.5	1.3	3.3	1.0	1.0	0.4	0.7	1.0
	Does not	0.1	0.6	0.3	0.3	0.6	0.3	0.2	0.1

Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table A5.51 Percentage Using Cocaine in the Past Year,
by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 12 to 17
STANDARD ERRORS

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Total		0.1	0.3	0.4	0.6	0.4	0.4	0.2	0.1
Region:	Northeast	0.1	0.5	0.0	0.0	0.6	0.4	0.3	0.2
	North Central	0.2	0.7	0.0	0.2	0.0	0.0	0.2	0.2
	South	0.2	0.0	0.7	1.1	0.3	0.5	0.3	0.2
	West	0.3	0.6	0.0	0.8	1.6	0.9	0.4	0.4
Density:	MSA > 1 million	0.1	0.2	0.5	0.5	0.5	0.4	0.2	0.2
	Other MSA	0.2	1.0	0.0	1.4	0.0	1.7	0.3	0.2
	Not in MSA	0.2	0.0	0.0	1.6	6.2	0.5	1.0	0.2
Interview:	Spanish	0.2	0.0	0.0	0.2	1.8	0.4	0.0	0.0
	English	0.1	0.3	0.5	0.6	0.4	0.5	0.2	0.1
Family Income:	<$20,000	0.2	1.2	0.6	0.7	0.5	0.5	0.2	0.3
	$20-40,000	0.3	0.5	0.5	0.9	1.1	1.4	0.7	0.4
	>$40,000	0.1	0.2	0.8	1.1	0.9	0.3	0.1	0.1
School Dropout:	Yes	1.9	0.0	6.0	2.7	5.8	2.7	2.6	3.1
	No	0.1	0.3	0.4	0.6	0.4	0.4	0.2	0.1
Family:	Mother/Father	0.1	0.0	0.6	0.6	0.7	0.6	0.1	0.1
	Other	0.2	1.5	0.6	0.8	0.5	0.5	0.3	0.3
Health Insured:	Yes	0.1	0.4	0.4	0.6	0.5	0.3	0.2	0.1
	No	0.4	0.7	1.1	0.9	0.7	1.1	0.4	0.6
Welfare:	Receives	0.4	2.9	1.2	1.1	0.5	0.9	0.3	0.8
	Does not	0.1	0.1	0.4	0.6	0.6	0.4	0.2	0.1

Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table A5.52 Percentage Using Cocaine in the Past Year,
by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 18 and Older
STANDARD ERRORS

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Total		0.1	0.6	0.3	0.3	0.6	0.3	0.3	0.1
Gender:	Female	0.1	0.1	0.3	0.3	0.5	0.4	0.2	0.1
	Male	0.2	1.3	0.7	0.5	1.3	0.5	0.5	0.2
Age:	12 to 17	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	18 to 25	0.3	1.8	0.9	0.6	1.4	1.0	0.5	0.4
	26 to 34	0.2	1.6	1.6	0.4	1.9	0.8	0.6	0.3
	35 and older	0.1	0.5	0.2	0.5	0.4	0.2	0.3	0.1
Region:	Northeast	0.2	0.1	1.1	1.9	0.8	0.5	0.6	0.3
	North Central	0.2	0.0	0.0	0.8	1.2	1.5	0.5	0.2
	South	0.2	0.2	0.4	0.4	1.1	0.4	0.3	0.2
	West	0.3	1.2	0.5	0.5	3.1	0.5	1.1	0.3
Density:	MSA > 1 million	0.1	0.7	0.3	0.4	0.5	0.3	0.3	0.2
	Other MSA	0.2	1.5	1.8	0.5	2.2	0.9	0.5	0.2
	Not in MSA	0.2	0.8	0.0	1.2	6.0	0.6	0.5	0.3
Interview:	Spanish	0.2	0.0	0.4	0.3	1.4	0.5	8.2	0.0
	English	0.1	0.6	0.5	0.5	0.7	0.3	0.3	0.1
Family Income:	<$20,000	0.2	1.2	0.8	0.3	1.0	0.4	0.3	0.2
	$20-40,000	0.2	1.8	0.6	1.0	1.3	0.7	0.7	0.2
	>$40,000	0.1	0.7	0.5	0.5	0.8	0.4	0.4	0.1
Education:	0-8 Years	0.3	1.3	0.6	0.2	0.6	0.4	0.7	0.5
	9-11 Years	0.3	1.7	2.0	0.8	1.5	0.8	0.6	0.3
	12 Years	0.2	1.1	0.8	0.8	1.0	0.7	0.4	0.2
	>12 Years	0.1	0.8	0.4	0.9	0.7	0.4	0.4	0.2

(continued)

Table A5.52 Percentage Using Cocaine in the Past Year,
by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 18 and Older
STANDARD ERRORS (Continued)

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Marital Status:	Married	0.1	0.6	0.4	0.4	0.6	0.2	0.3	0.1
	Widowed/div/sep	0.2	0.7	1.1	0.6	1.2	0.8	0.5	0.2
	Never married	0.3	1.5	0.8	0.7	1.6	0.9	0.5	0.4
Employment:	Employed	0.1	0.6	0.4	0.4	0.8	0.4	0.3	0.1
	Unemployed	0.7	3.8	3.6	1.4	2.3	1.0	1.0	1.0
	Not in labor force	0.1	1.3	0.1	0.3	0.7	0.3	0.4	0.1
Own Children:	None	0.1	1.1	0.4	0.6	1.0	0.5	0.4	0.2
	1 or more	0.1	0.1	0.6	0.4	0.7	0.3	0.3	0.2
Health Insured:	Yes	0.1	0.7	0.3	0.4	0.7	0.3	0.3	0.1
	No	0.4	1.2	1.1	0.5	1.6	0.6	0.5	0.5
Welfare:	Receives	0.6	1.5	3.8	1.3	1.4	0.5	0.9	1.1
	Does not	0.1	0.6	0.3	0.3	0.7	0.3	0.2	0.1

N/A: Not applicable.
Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table A5.60 Percentage in Need of Illicit Drug Abuse Treatment,
by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 12 and Older
STANDARD ERRORS

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Total		0.1	0.5	0.7	0.2	0.4	0.4	0.2	0.1
Gender:	Female	0.1	0.6	0.3	0.3	0.5	0.7	0.3	0.1
	Male	0.2	0.8	1.5	0.4	0.7	0.4	0.4	0.2
Age:	12 to 17	0.2	0.6	1.0	0.7	0.8	0.6	0.4	0.2
	18 to 25	0.3	0.8	3.3	0.5	1.4	1.0	0.6	0.4
	26 to 34	0.2	2.1	3.3	0.5	1.2	0.8	0.6	0.2
	35 and older	0.1	0.4	0.2	0.4	0.6	0.7	0.4	0.1
Region:	Northeast	0.2	1.5	1.0	0.7	0.5	0.4	0.5	0.3
	North Central	0.2	0.2	4.9	1.2	1.1	0.2	0.5	0.2
	South	0.2	0.7	0.9	0.5	0.7	1.4	0.3	0.2
	West	0.2	0.8	2.8	0.3	2.3	0.6	1.0	0.3
Density:	MSA > 1 million	0.1	0.6	0.8	0.3	0.4	0.5	0.3	0.2
	Other MSA	0.2	0.7	2.1	0.5	1.2	0.8	0.5	0.2
	Not in MSA	0.2	0.7	7.4	1.1	3.9	1.1	0.8	0.2
Interview:	Spanish	0.2	0.0	0.4	0.2	0.7	0.4	6.8	0.0
	English	0.1	0.5	1.1	0.3	0.5	0.6	0.2	0.1
Family Income:	<$20,000	0.2	1.2	1.1	0.3	0.7	0.5	0.3	0.3
	$20-40,000	0.2	0.1	1.1	0.5	1.2	0.5	0.6	0.2
	>$40,000	0.1	0.8	1.3	0.5	0.6	0.9	0.4	0.1
Health Insured:	Yes	0.1	0.6	0.4	0.3	0.5	0.6	0.3	0.1
	No	0.3	0.5	2.9	0.4	1.1	0.7	0.5	0.4
Welfare:	Receives	0.6	1.3	3.2	0.8	1.0	0.9	0.8	0.9
	Does not	0.1	0.5	0.8	0.2	0.5	0.4	0.2	0.1

Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table A5.61 Percentage in Need of Illicit Drug Abuse Treatment, by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 12 to 17
STANDARD ERRORS

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Total		0.2	0.6	1.0	0.7	0.8	0.6	0.4	0.2
Region:	Northeast	0.4	0.5	0.0	7.3	1.2	0.8	0.5	0.5
	North Central	0.3	0.0	10.1	2.9	1.4	1.0	0.8	0.3
	South	0.3	2.2	0.8	1.3	0.3	1.2	0.5	0.4
	West	0.6	0.8	5.3	0.7	3.2	1.1	2.2	0.9
Density:	MSA > 1 million	0.3	0.4	0.9	0.8	0.8	0.6	0.4	0.5
	Other MSA	0.3	1.7	4.4	1.5	2.3	2.1	0.8	0.4
	Not in MSA	0.4	0.0	0.0	2.5	6.2	1.7	0.9	0.5
Interview:	Spanish	0.4	0.0	0.0	0.5	0.9	0.4	0.0	0.0
	English	0.2	0.6	1.2	0.8	0.9	0.7	0.4	0.2
Family Income:	<$20,000	0.4	1.2	0.7	1.1	1.3	0.6	0.5	0.6
	$20-40,000	0.5	0.0	0.9	1.3	1.2	1.8	1.1	0.7
	>$40,000	0.3	0.9	2.5	1.1	1.5	1.1	0.8	0.3
School Dropout:	Yes	2.3	0.0	6.6	3.1	6.6	2.2	3.5	3.7
	No	0.2	0.6	1.0	0.7	0.8	0.7	0.4	0.3
Family:	Mother/Father	0.2	0.6	1.5	0.6	1.1	0.9	0.3	0.3
	Other	0.4	1.7	1.4	1.4	1.2	0.9	0.6	0.6
Health Insured:	Yes	0.2	0.6	1.3	0.9	0.9	0.6	0.4	0.3
	No	0.5	1.8	1.2	0.9	2.3	1.3	0.6	0.9
Welfare:	Receives	0.9	2.8	1.6	2.2	1.5	1.5	0.8	2.1
	Does not	0.2	0.6	1.2	0.7	0.9	0.7	0.4	0.2

Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table A5.62 Percentage in Need of Illicit Drug Abuse Treatment, by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 18 and Older
STANDARD ERRORS

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Total		0.1	0.5	0.8	0.3	0.5	0.5	0.3	0.1
Gender:	Female	0.1	0.7	0.4	0.3	0.5	0.7	0.3	0.1
	Male	0.2	0.9	1.6	0.4	0.9	0.4	0.5	0.2
Age:	12 to 17	*	*	*	*	*	*	*	*
	18 to 25	0.3	0.8	3.3	0.5	1.4	1.0	0.6	0.4
	26 to 34	0.2	2.1	3.3	0.5	1.2	0.8	0.6	0.2
	35 and older	0.1	0.4	0.2	0.4	0.6	0.7	0.4	0.1
Region:	Northeast	0.3	1.7	1.0	0.0	0.6	0.5	0.5	0.3
	North Central	0.2	0.2	5.3	1.3	1.2	0.3	0.5	0.2
	South	0.2	0.7	1.0	0.5	0.8	1.5	0.4	0.2
	West	0.3	0.8	3.0	0.3	2.7	0.6	1.1	0.3
Density:	MSA > 1 million	0.1	0.7	0.8	0.3	0.5	0.6	0.3	0.2
	Other MSA	0.2	0.7	2.3	0.4	1.4	0.8	0.6	0.2
	Not in MSA	0.2	0.8	7.8	1.2	4.1	1.1	0.9	0.2
Interview:	Spanish	0.2	0.0	0.4	0.3	0.7	0.4	8.2	0.0
	English	0.1	0.5	1.2	0.4	0.5	0.6	0.3	0.1
Family Income:	<$20,000	0.2	1.3	1.1	0.3	0.8	0.6	0.4	0.3
	$20-40,000	0.2	0.2	1.2	0.5	1.3	0.5	0.7	0.2
	>$40,000	0.1	0.8	1.4	0.6	0.6	1.0	0.4	0.1
Education:	0-8 Years	0.4	1.4	0.7	0.3	0.9	0.3	0.6	0.6
	9-11 Years	0.3	0.9	2.1	0.7	1.2	0.7	0.7	0.4
	12 Years	0.2	1.0	2.3	0.4	0.8	0.7	0.4	0.2
	>12 Years	0.1	0.8	0.8	0.8	1.0	1.2	0.4	0.1

(continued)

Table A5.62 Percentage in Need of Illicit Drug Abuse Treatment, by Race/Ethnicity and Sociodemographic Characteristics,1991-1993
Respondents Aged 18 and Older
STANDARD ERRORS (continued)

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Marital Status:	Married	0.1	0.5	0.4	0.3	0.4	0.3	0.4	0.1
	Widowed/div/sep	0.3	0.7	1.1	0.6	1.1	2.2	0.4	0.3
	Never married	0.3	1.4	3.8	0.6	1.3	0.8	0.5	0.3
Employment:	Employed	0.1	0.7	1.0	0.3	0.6	0.7	0.4	0.1
	Unemployed	0.6	3.8	5.6	1.1	2.2	1.1	1.0	1.0
	Not in labor force	0.1	0.3	1.0	0.3	0.7	0.5	0.4	0.2
Own Children:	None	0.1	1.0	1.4	0.5	0.8	0.4	0.4	0.2
	1 or more	0.1	0.3	0.5	0.2	0.5	0.7	0.4	0.2
Health Insured:	Yes	0.1	0.7	0.4	0.3	0.5	0.6	0.3	0.1
	No	0.3	0.5	3.1	0.4	1.2	0.7	0.6	0.5
Welfare:	Receives	0.7	1.5	3.6	0.9	1.4	1.1	1.0	1.1
	Does not	0.1	0.6	0.8	0.3	0.5	0.5	0.3	0.1

* Low precision.
Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table A5.70 Percentage Reporting Dependence on Alcohol,
by Race/Ethnicity and Sociodemographic Characteristics,1991-1993
Respondents Aged 12 and Older
STANDARD ERRORS

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Total		0.1	0.6	0.2	0.4	0.4	0.3	0.2	0.1
Gender:	Female	0.1	0.2	0.2	0.3	0.3	0.3	0.2	0.1
	Male	0.2	1.2	0.3	0.8	0.8	0.6	0.5	0.2
Age:	12 to 17	0.2	0.3	0.2	0.5	0.5	0.6	0.3	0.2
	18 to 25	0.4	0.7	0.8	0.7	1.2	1.1	0.5	0.5
	26 to 34	0.2	1.6	0.6	1.0	1.1	1.0	0.4	0.3
	35 and older	0.2	0.8	0.2	0.5	0.6	0.4	0.4	0.2
Region:	Northeast	0.2	0.2	0.2	1.8	0.5	0.7	0.7	0.3
	North Central	0.2	2.8	0.0	1.0	2.0	1.0	0.5	0.2
	South	0.2	0.4	0.2	0.9	0.4	0.5	0.3	0.2
	West	0.3	0.8	1.1	0.5	1.9	0.5	0.7	0.4
Density:	MSA > 1 million	0.2	0.6	0.2	0.4	0.4	0.4	0.3	0.2
	Other MSA	0.2	1.8	0.4	0.7	1.1	1.1	0.6	0.2
	Not in MSA	0.3	1.0	0.0	2.0	2.2	0.8	0.5	0.3
Interview:	Spanish	0.5	0.0	0.3	0.7	0.2	0.7	0.0	0.0
	English	0.1	0.6	0.2	0.5	0.4	0.4	0.2	0.1
Family Income:	<$20,000	0.2	0.4	0.4	0.5	0.6	0.4	0.3	0.3
	$20-40,000	0.3	1.3	0.5	0.8	0.6	0.7	0.5	0.3
	>$40,000	0.2	0.8	0.2	0.7	0.8	0.7	0.4	0.2
Health Insured:	Yes	0.1	0.7	0.2	0.5	0.5	0.4	0.3	0.1
	No	0.4	0.3	0.4	0.6	0.8	0.6	0.6	0.5
Welfare:	Receives	0.5	0.7	1.3	0.8	0.8	1.3	0.6	0.8
	Does not	0.1	0.6	0.2	0.5	0.5	0.3	0.2	0.1

Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table A5.71 Percentage Reporting Dependence on Alcohol,
by Race/Ethnicity and Sociodemographic Characteristics,1991-1993
Respondents Aged 12 to 17
STANDARD ERRORS

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Total		0.2	0.3	0.2	0.5	0.5	0.6	0.3	0.2
Region:	Northeast	0.5	0.0	0.0	6.9	0.6	0.4	0.8	0.6
	North Central	0.4	0.4	0.0	1.3	2.0	1.0	0.3	0.5
	South	0.3	0.0	0.3	1.0	0.2	1.3	0.4	0.3
	West	0.3	0.5	0.0	0.6	2.0	1.1	1.6	0.5
Density:	MSA > 1 million	0.2	0.4	0.3	0.4	0.4	0.6	0.2	0.3
	Other MSA	0.3	0.0	0.0	0.8	1.4	0.3	0.8	0.4
	Not in MSA	0.4	0.0	0.0	3.0	0.0	2.3	1.3	0.5
Interview:	Spanish	0.5	0.0	0.0	0.6	0.0	0.0	0.0	0.0
	English	0.2	0.3	0.2	0.6	0.5	0.7	0.3	0.2
Family Income:	<$20,000	0.3	0.0	0.2	0.7	0.5	1.1	0.4	0.6
	$20-40,000	0.5	0.0	0.4	0.6	0.6	1.4	1.1	0.6
	>$40,000	0.2	0.5	0.5	1.1	1.5	0.3	0.3	0.3
School Dropout:	Yes	1.1	0.0	0.0	1.4	3.4	2.2	3.2	1.5
	No	0.2	0.3	0.2	0.5	0.5	0.6	0.3	0.2
Family:	Mother/Father	0.2	0.3	0.4	0.7	0.8	0.6	0.2	0.3
	Other	0.3	0.2	0.2	0.7	0.6	1.0	0.5	0.5
Health Insured:	Yes	0.2	0.3	0.2	0.5	0.4	0.9	0.3	0.3
	No	0.5	0.0	0.6	0.9	1.8	0.3	0.9	0.7
Welfare:	Receives	0.5	0.0	0.0	1.1	0.2	2.5	0.5	1.3
	Does not	0.2	0.3	0.3	0.6	0.7	0.5	0.4	0.2

Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table A5.72 Percentage Reporting Dependence on Alcohol,
by Race/Ethnicity and Sociodemographic Characteristics,1991-1993
Respondents Aged 18 and Older
STANDARD ERRORS

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Total		0.1	0.6	0.2	0.5	0.5	0.4	0.3	0.2
Gender:	Female	0.1	0.2	0.2	0.3	0.4	0.3	0.2	0.1
	Male	0.2	1.3	0.3	0.9	1.0	0.7	0.5	0.3
Age:	12 to 17	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	18 to 25	0.4	0.7	0.8	0.7	1.2	1.1	0.5	0.5
	26 to 34	0.2	1.6	0.6	1.0	1.1	1.0	0.4	0.3
	35 and older	0.2	0.8	0.2	0.5	0.6	0.4	0.4	0.2
Region:	Northeast	0.3	0.3	0.2	1.5	0.5	0.8	0.8	0.3
	North Central	0.3	3.2	0.0	1.1	2.3	1.2	0.6	0.3
	South	0.2	0.5	0.2	1.0	0.4	0.6	0.3	0.3
	West	0.3	0.9	1.2	0.6	2.2	0.6	0.8	0.5
Density:	MSA > 1 million	0.2	0.6	0.2	0.5	0.5	0.5	0.3	0.3
	Other MSA	0.2	2.1	0.4	0.8	1.3	1.3	0.7	0.2
	Not in MSA	0.3	1.1	0.0	2.2	2.5	1.1	0.5	0.3
Interview:	Spanish	0.6	0.0	0.3	0.7	0.3	0.8	0.0	0.0
	English	0.1	0.6	0.2	0.6	0.5	0.4	0.3	0.2
Family Income:	<$20,000	0.2	0.5	0.4	0.6	0.8	0.5	0.4	0.3
	$20-40,000	0.3	1.5	0.5	0.9	0.7	0.8	0.6	0.4
	>$40,000	0.2	0.9	0.2	0.7	0.9	0.8	0.5	0.2
Education:	0-8 Years	0.4	0.0	0.4	0.7	0.6	0.6	1.0	0.6
	9-11 Years	0.3	0.1	1.2	0.9	0.8	1.2	0.7	0.4
	12 Years	0.3	0.3	0.3	0.9	0.9	0.8	0.4	0.3
	>12 Years	0.2	1.0	0.2	0.8	1.1	0.7	0.4	0.2

(continued)

Table A5.72 Percentage Reporting Dependence on Alcohol,
by Race/Ethnicity and Sociodemographic Characteristics,1991-1993
Respondents Aged 18 and Older
STANDARD ERRORS (continued)

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Marital Status:	Married	0.1	1.0	0.2	0.6	0.7	0.4	0.4	0.2
	Widowed/div/sep	0.2	0.6	0.5	1.0	1.3	1.0	0.4	0.3
	Never married	0.3	0.6	0.6	0.8	1.0	1.0	0.5	0.4
Employment:	Employed	0.2	0.9	0.2	0.6	0.6	0.5	0.4	0.2
	Unemployed	0.6	1.0	1.0	1.8	1.2	2.1	0.9	0.9
	Not in labor force	0.2	0.5	0.4	0.5	1.0	0.8	0.5	0.3
Own Children:	None	0.2	1.1	0.3	0.7	0.9	0.6	0.4	0.2
	1 or more	0.1	0.6	0.2	0.6	0.4	0.5	0.4	0.2
Health Insured:	Yes	0.1	0.8	0.2	0.5	0.5	0.5	0.3	0.2
	No	0.4	0.4	0.4	0.7	0.8	0.7	0.7	0.6
Welfare:	Receives	0.6	1.0	1.6	1.0	1.1	1.6	0.8	0.9
	Does not	0.1	0.7	0.2	0.5	0.5	0.4	0.3	0.2

N/A: Not applicable.
Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table A5.80 Percentage Reporting Heavy Alcohol Use in the Past Month, by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 12 and Older
STANDARD ERRORS

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Total		0.2	0.3	0.5	0.4	0.6	0.4	0.3	0.2
Gender:	Female	0.1	0.1	0.3	0.2	0.4	0.4	0.2	0.2
	Male	0.3	0.6	1.1	0.7	1.2	0.8	0.7	0.4
Age:	12 to 17	0.1	0.3	0.2	0.4	0.4	0.6	0.2	0.2
	18 to 25	0.5	0.5	2.7	0.7	1.8	1.3	0.6	0.6
	26 to 34	0.3	0.6	0.9	0.8	1.7	0.9	0.5	0.4
	35 and older	0.2	0.4	0.6	0.8	0.7	0.5	0.5	0.3
Region:	Northeast	0.4	0.2	0.5	3.4	0.7	0.7	0.7	0.5
	North Central	0.3	0.4	0.0	1.3	1.9	1.6	0.6	0.4
	South	0.2	0.5	0.7	0.9	1.2	0.6	0.5	0.3
	West	0.3	0.5	2.0	0.5	2.0	0.6	0.8	0.5
Density:	MSA > 1 million	0.2	0.3	0.5	0.4	0.6	0.3	0.4	0.3
	Other MSA	0.3	0.6	0.4	0.8	1.6	1.4	0.8	0.3
	Not in MSA	0.4	0.0	7.4	2.1	2.8	0.8	0.7	0.4
Interview:	Spanish	0.5	0.0	1.0	0.7	1.2	0.7	0.0	0.0
	English	0.2	0.3	0.6	0.5	0.6	0.5	0.3	0.2
Family Income:	<$20,000	0.3	0.9	1.4	0.6	0.7	0.6	0.5	0.4
	$20-40,000	0.3	0.5	1.0	0.9	1.3	0.8	0.5	0.4
	>$40,000	0.2	0.2	0.4	0.6	1.1	0.5	0.5	0.3
Health Insured:	Yes	0.2	0.3	0.5	0.5	0.6	0.5	0.3	0.2
	No	0.4	0.2	1.3	0.8	1.7	0.7	0.7	0.6
Welfare:	Receives	0.6	0.7	2.7	1.6	0.8	1.7	0.6	1.1
	Does not	0.2	0.3	0.5	0.4	0.7	0.4	0.4	0.2

Note: Heavy use is defined as drinking five or more drinks per occasion on 5 or more days in the past 30 days.
Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table A5.81 Percentage Currently Smoking a Pack or More of Cigarettes a Day, by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 12 to 17
STANDARD ERRORS

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Total		0.1	0.5	0.3	0.1	0.3	0.2	0.1	0.2
Region:	Northeast	0.3	2.3	0.0	0.0	0.4	0.2	0.3	0.3
	North Central	0.3	0.0	0.0	0.1	0.2	1.0	0.3	0.3
	South	0.3	0.0	0.5	0.2	0.3	0.0	0.2	0.4
	West	0.3	0.7	0.0	0.2	0.0	0.5	0.1	0.5
Density:	MSA > 1 million	0.2	0.8	0.4	0.1	0.4	0.3	0.1	0.3
	Other MSA	0.3	0.0	0.0	0.4	0.0	0.0	0.3	0.4
	Not in MSA	0.3	0.0	0.0	0.0	0.0	0.5	0.0	0.4
Interview:	Spanish	0.3	0.0	0.0	0.5	0.9	0.0	0.0	0.0
	English	0.1	0.5	0.4	0.1	0.3	0.2	0.1	0.2
Family Income:	<$20,000	0.3	1.6	0.6	0.3	0.4	0.2	0.2	0.5
	$20-40,000	0.4	0.0	0.5	0.2	0.9	0.8	0.1	0.5
	>$40,000	0.2	0.6	0.6	0.0	0.4	0.2	0.2	0.2
School Dropout:	Yes	2.3	0.0	3.8	2.6	7.7	2.2	1.1	3.7
	No	0.1	0.5	0.3	0.0	0.2	0.2	0.1	0.2
Family:	Mother/Father	0.2	0.5	0.4	0.0	0.4	0.0	0.2	0.2
	Other	0.3	1.5	0.6	0.4	0.5	0.5	0.2	0.5
Health Insured:	Yes	0.2	0.6	0.2	0.1	0.3	0.3	0.1	0.2
	No	0.4	0.0	1.2	0.3	1.3	0.0	0.1	0.8
Welfare:	Receives	0.6	4.2	0.0	0.5	0.6	0.0	0.4	1.5
	Does not	0.1	0.0	0.4	0.1	0.3	0.2	0.1	0.2

Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table A5.82 Percentage Reporting Heavy Alcohol Use in the Past Month, by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 18 and Older
STANDARD ERRORS

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Total		0.2	0.3	0.6	0.5	0.6	0.4	0.4	0.2
Gender:	Female	0.1	0.1	0.3	0.2	0.4	0.4	0.2	0.2
	Male	0.3	0.6	1.2	0.9	1.4	0.9	0.8	0.4
Age:	12 to 17	*	*	*	*	*	*	*	*
	18 to 25	0.5	0.5	2.7	0.7	1.8	1.3	0.6	0.6
	26 to 34	0.3	0.6	0.9	0.8	1.7	0.9	0.5	0.4
	35 and older	0.2	0.4	0.6	0.8	0.7	0.5	0.5	0.3
Region:	Northeast	0.4	0.2	0.6	3.5	0.8	0.8	0.7	0.5
	North Central	0.4	0.5	0.0	1.6	2.3	1.8	0.6	0.4
	South	0.3	0.5	0.7	1.1	1.3	0.7	0.6	0.3
	West	0.3	0.5	2.2	0.6	2.4	0.7	1.0	0.5
Density:	MSA > 1 million	0.2	0.4	0.6	0.5	0.6	0.4	0.4	0.3
	Other MSA	0.3	0.7	0.5	0.9	2.0	1.5	0.9	0.3
	Not in MSA	0.4	0.0	7.8	2.6	3.1	0.9	0.8	0.5
Interview:	Spanish	0.5	0.0	1.0	0.7	1.2	0.7	0.0	0.0
	English	0.2	0.3	0.7	0.6	0.7	0.6	0.4	0.2
Family Income:	<$20,000	0.3	1.0	1.5	0.7	0.9	0.7	0.6	0.4
	$20-40,000	0.3	0.6	1.1	1.0	1.5	0.9	0.6	0.4
	>$40,000	0.2	0.3	0.4	0.7	1.3	0.6	0.6	0.3
Education:	0-8 Years	0.6	1.9	1.9	1.0	1.5	0.7	2.3	0.9
	9-11 Years	0.5	0.7	1.5	0.9	0.9	1.6	0.8	0.6
	12 Years	0.3	1.0	0.5	0.9	1.3	0.9	0.5	0.3
	>12 Years	0.3	0.2	0.9	0.7	1.5	0.6	0.4	0.3

(continued)

Table A5.82 Percentage Reporting Heavy Alcohol Use in the Past Month, by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 18 and Older
STANDARD ERRORS (Continued)

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Marital Status:	Married	0.2	0.3	0.4	0.5	0.8	0.4	0.7	0.2
	Widowed/div/sep	0.3	0.7	1.3	1.9	0.9	1.1	0.5	0.4
	Never married	0.4	0.9	2.3	0.9	1.8	1.7	0.6	0.6
Employment:	Employed	0.2	0.3	0.7	0.6	0.9	0.5	0.5	0.3
	Unemployed	0.8	3.9	0.7	2.1	2.1	2.0	1.0	1.1
	Not in labor force	0.3	0.1	1.3	1.0	1.0	1.0	0.4	0.3
Own Children:	None	0.3	0.5	1.0	0.7	1.2	0.8	0.6	0.3
	1 or more	0.2	0.3	0.4	0.6	0.7	0.6	0.4	0.3
Health Insured:	Yes	0.2	0.4	0.6	0.6	0.7	0.5	0.4	0.2
	No	0.5	0.3	1.4	0.9	1.9	0.7	0.8	0.7
Welfare:	Receives	0.7	0.0	3.1	2.1	1.0	2.0	0.8	1.2
	Does not	0.2	0.3	0.6	0.5	0.8	0.5	0.4	0.2

*Low precision.
Note: Heavy use is defined as drinking five or more drinks per occasion on 5 or more days in the past 30 days.
Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table A5.90 Percentage Reporting Currently Smoking a Pack or More of Cigarettes a Day, by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 12 and Older
STANDARD ERRORS

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Total		0.3	0.9	1.1	0.5	1.0	0.6	0.4	0.4
Gender:	Female	0.4	1.0	0.8	0.5	1.3	0.5	0.5	0.5
	Male	0.5	1.4	2.0	0.7	1.6	1.0	0.7	0.6
Age:	12 to 17	0.1	0.5	0.3	0.1	0.3	0.2	0.1	0.2
	18 to 25	0.4	1.1	2.6	0.5	1.6	0.8	0.5	0.6
	26 to 34	0.5	1.1	3.3	0.6	2.0	0.9	0.8	0.6
	35 and older	0.5	1.5	1.4	1.0	1.8	1.0	0.7	0.6
Region:	Northeast	0.7	0.8	2.3	3.5	1.3	1.3	1.2	0.9
	North Central	0.7	2.3	0.0	2.0	2.7	2.6	0.8	0.8
	South	0.5	0.9	1.2	0.9	3.0	1.2	0.5	0.6
	West	0.6	1.7	7.4	0.6	4.2	0.7	1.2	0.8
Density:	MSA > 1 million	0.4	0.9	1.1	0.5	1.1	0.6	0.5	0.6
	Other MSA	0.5	2.9	4.3	1.1	1.9	1.8	1.0	0.6
	Not in MSA	0.8	5.9	10.3	1.6	9.4	2.0	1.2	0.8
Interview:	Spanish	0.4	0.0	0.9	0.5	2.1	0.9	0.9	7.1
	English	0.3	0.9	1.6	0.6	1.1	0.7	0.4	0.4
Family Income:	<$20,000	0.6	1.7	2.0	0.7	1.5	1.0	0.6	0.8
	$20-40,000	0.8	2.4	2.5	1.0	2.4	1.2	0.8	1.0
	>$40,000	0.4	1.2	1.8	0.6	1.9	0.8	0.8	0.5
Health Insured:	Yes	0.3	1.0	1.1	0.6	1.2	0.8	0.4	0.4
	No	0.7	2.0	3.5	0.7	1.7	1.0	0.9	1.0
Welfare:	Receives	1.2	4.5	7.5	1.7	2.7	1.7	1.0	2.1
	Does not	0.3	0.9	1.1	0.5	1.2	0.6	0.4	0.4

Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table A5.91 Percentage Reporting Heavy Alcohol Use in the Past Month, by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 12 to 17
STANDARD ERRORS

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Total		0.1	0.3	0.2	0.4	0.4	0.6	0.2	0.2
Region:	Northeast	0.3	0.0	0.0	9.2	0.6	1.1	0.5	0.4
	North Central	0.3	0.0	0.0	0.8	0.0	0.0	0.3	0.4
	South	0.2	0.1	0.3	0.9	0.0	0.1	0.2	0.3
	West	0.3	0.7	0.0	0.3	0.0	1.1	0.2	0.5
Density:	MSA > 1 million	0.2	0.5	0.3	0.4	0.6	0.7	0.2	0.3
	Other MSA	0.2	0.0	0.0	0.9	0.0	0.9	0.4	0.3
	Not in MSA	0.4	0.0	0.0	1.4	0.0	1.8	0.6	0.4
Interview:	Spanish	0.2	0.0	1.2	0.2	0.0	0.1	0.0	0.0
	English	0.1	0.3	0.2	0.4	0.4	0.6	0.2	0.2
Family Income:	<$20,000	0.2	0.0	0.4	0.6	0.2	0.8	0.2	0.4
	$20-40,000	0.4	0.0	0.4	0.8	0.9	0.9	0.6	0.5
	>$40,000	0.2	0.6	0.3	0.9	1.4	0.8	0.2	0.2
School Dropout:	Yes	1.7	0.0	3.1	2.1	0.0	3.1	1.6	2.6
	No	0.1	0.3	0.2	0.4	0.4	0.6	0.2	0.2
Family:	Mother/Father	0.2	0.0	0.3	0.5	0.8	0.4	0.2	0.2
	Other	0.2	1.5	0.4	0.7	0.2	1.2	0.2	0.4
Health Insured:	Yes	0.2	0.4	0.2	0.5	0.5	0.7	0.2	0.2
	No	0.3	0.0	0.6	0.7	0.0	0.7	0.3	0.5
Welfare:	Receives	0.5	2.8	1.0	1.2	0.4	0.0	0.4	1.2
	Does not	0.1	0.0	0.2	0.4	0.6	0.6	0.2	0.2

Note: Heavy use is defined as drinking five or more drinks per occasion on 5 or more days in the past 30 days.
Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

Table A5.92 Percentage Reporting Currently Smoking a Pack or More of Cigarettes a Day, by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 18 and Older
STANDARD ERRORS

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Total		0.3	1.0	1.2	0.6	1.2	0.6	0.5	0.4
Gender:	Female	0.4	1.1	0.8	0.6	1.5	0.5	0.5	0.5
	Male	0.5	1.6	2.2	0.8	1.9	1.2	0.8	0.7
Age:	12 to 17	*	*	*	*	*	*	*	*
	18 to 25	0.4	1.1	2.6	0.5	1.6	0.8	0.5	0.6
	26 to 34	0.5	1.1	3.3	0.6	2.0	0.9	0.8	0.6
	35 and older	0.5	1.5	1.4	1.0	1.8	1.0	0.7	0.6
Region:	Northeast	0.7	0.9	2.5	3.9	1.5	1.5	1.3	0.9
	North Central	0.8	2.7	0.0	2.5	3.2	2.7	0.9	0.9
	South	0.5	1.1	1.2	1.0	3.5	1.3	0.6	0.7
	West	0.7	1.9	8.2	0.7	4.6	0.8	1.4	0.9
Density:	MSA > 1 million	0.4	1.0	1.1	0.5	1.2	0.6	0.5	0.6
	Other MSA	0.6	3.5	4.9	1.3	2.2	2.0	1.2	0.7
	Not in MSA	0.9	6.8	10.9	2.1	10.6	2.2	1.5	0.9
Interview:	Spanish	0.4	0.0	1.0	0.6	2.2	1.0	1.1	7.1
	English	0.3	1.1	1.8	0.8	1.3	0.8	0.5	0.4
Family Income:	<$20,000	0.6	1.9	2.2	0.8	1.9	1.1	0.7	0.9
	$20-40,000	0.9	2.8	2.8	1.2	2.8	1.4	0.9	1.1
	>$40,000	0.5	1.4	2.0	0.7	2.2	0.9	0.9	0.6
Education:	0-8 Years	1.4	0.0	1.8	0.8	2.1	1.4	1.7	2.3
	9-11 Years	1.1	2.9	4.2	1.1	2.8	1.6	1.2	1.5
	12 Years	0.6	3.5	2.6	1.1	2.1	1.6	0.8	0.7
	>12 Years	0.5	0.7	2.1	0.6	2.5	0.8	0.8	0.6

(continued)

Table A5.92 Percentage Reporting Currently Smoking a Pack or More of Cigarettes a Day, by Race/Ethnicity and Sociodemographic Characteristics, 1991-1993
Respondents Aged 18 and Older
STANDARD ERRORS(Continued)

		Race/Ethnicity							
		Total	Asian/ Pac Isl	Hispanic Cuba	Hispanic Mexico	Hispanic Puerto Rico	Hispanic other	Non-Hispanic black	Non-Hispanic white
Variable/subclass									
Marital Status:	Married	0.5	1.2	1.3	0.6	2.0	0.9	0.7	0.5
	Widowed/div/sep	0.8	5.7	1.8	2.0	2.0	1.7	0.8	1.1
	Never married	0.4	1.3	4.0	0.6	1.7	1.4	0.7	0.6
Employment:	Employed	0.5	1.3	1.6	0.6	1.9	0.7	0.6	0.6
	Unemployed	1.2	4.6	6.8	1.2	2.5	3.4	1.4	1.7
	Not in labor force	0.6	1.3	1.7	1.0	1.6	1.0	0.9	0.8
Own Children:	None	0.4	1.5	1.8	0.7	1.7	1.0	0.7	0.5
	1 or more	0.5	1.7	1.8	0.7	1.8	0.9	0.6	0.7
Health Insured:	Yes	0.4	1.1	1.2	0.7	1.4	0.9	0.5	0.4
	No	0.8	2.2	3.7	0.8	1.9	1.1	1.0	1.1
Welfare:	Receives	1.5	5.8	9.2	2.2	3.4	2.0	1.3	2.4
	Does not	0.3	1.1	1.2	0.6	1.3	0.7	0.5	0.4

*Low precision.
Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse, 1991-93.

APPENDIX B. NHSDA SAMPLE REDESIGN OPTIONS FOR IMPROVING ESTIMATES OF DRUG USE PREVALENCE IN SMALL RACIAL/ETHNIC SUBGROUPS

1 Problems of Sampling Small Racial/Ethnic Subgroups

Chapter 1 discussed four limitations of NHSDA data for the analysis of racial/ethnic patterns of substance use: 1) limitations in the measurement of substance use, 2)problems in the measurement of race/ethnicity (especially inability to measure identification with Asian/Pacific Islander national origin subgroups), 3) the lack of measurements of important covariates of race/ethnicity, and 4) inadequate sample representation of smaller racial/ethnic groups. This appendix addresses the fourth of these limitations by examining options for redesigning the NHSDA sample to yield larger samples of small racial/ethnic subgroups. We compare and evaluate these options with respect to statistical efficiency, feasibility, and survey costs.

The sample design and estimation techniques of the NHSDA currently support satisfactorily precise estimates of drug use prevalence among blacks, whites, and Hispanics in the NHSDA target population and among subclasses of these three groups defined by gender and age.[1] Like the National Health Interview Survey (NCHS, 1989; Judkins et al., 1994), the NHSDA uses disproportionate stratified sampling of primary sampling units (PSUs), of areal segments within PSUs, of screened households within segments, and of individuals within households to increase the sample counts of blacks and Hispanics. Yet the current NHSDA does not allow sufficiently precise annual estimates of drug use prevalence in smaller racial/ethnic groups such as Native Americans, Asian and Pacific Islander subgroups (e.g., Chinese, Filipinos, Koreans, Vietnamese), and Hispanic subgroups (e.g., Cubans, Puerto Ricans). Even after combining the large NHSDAs conducted in 1991 through 1993, for a total combined sample size of more than 87,000 respondents, we found in Chapters 4 and 5 that detailed patterns of drug use prevalence in the Native American, "Hispanic- Caribbean," and "Hispanic-South America" subgroups were too imprecise to be reported. (See Appendix A for discussion of SAMHSA's criterion for suppressing low precision estimates.) Taking Native Americans as an example, standard error tables (Appendix A) suggest that it would be necessary to increase the combined 1991-93 sample size (n = 416) by a factor of about 2.5, to about 1,000 completed interviews, to produce drug use prevalence estimates for age-sex categories of Native Americans that are sufficiently precise to be reported. Perhaps four

[1]The precision targets of the 1995 NHSDA included coefficients of variation (CVs) of less than 12% for estimates of drug use prevalence between 10% and 90% among Hispanics aged 12-17, 18-25, 26-34, and 35 and older and among non-Hispanic blacks in the same age groups. See Research Triangle Institute (1995) for details.

times as many Native American respondents would be required to produce more detailed estimates such as those presented for larger racial/ethnic categories in Chapter 5.

The required sample size of a subgroup in the NHSDA, or in any other survey, depends upon the specific analytical objectives. For example, an adequate sample size for estimating substance use prevalence in a subgroup might be inadequate for estimating change in prevalence in the subgroup or inadequate for estimating prevalence in sociodemographic subclasses of the subgroup. This Appendix does not assume specific required sample sizes, or corresponding levels of precision, for estimates of drug use prevalence within small racial/ethnic subgroups, because the sampling rates of each approach, and of each mix of approaches, might be tailored to obtain any levels of precision for domains defined by race/ethnicity and other variables. The optimal design would be the approach, or mix of approaches, that yielded the required levels of precision at minimum cost.

The optimal design for sampling rare populations generally depends upon two factors: 1) the availability of lists of rare population members and 2) the extent of geographical clustering of rare population members, i.e., the extent to which they are concentrated in relatively few geographic subareas. Unfortunately, lists with good coverage of households and auxiliary information on the racial/ethnic identifications of household members are not available and cannot easily be constructed in the United States.[2] Thus, the principal design consideration is the extent of geographical clustering of racial/ethnic subgroups. This Appendix restricts attention to probability sampling designs[3] and assumes that the collection of data from small racial/ethnic subgroups will use the standard NHSDA questionnaire and household interviewing procedures.[4] If a racial/ethnic subgroup is small and not highly

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[2]Use of household lists from the decennial U.S. censuses is prohibited by the confidentiality provisions in the authorizing legislation of the U.S. Bureau of the Census. Metropolitan telephone book listings might be used to sample ethnic groups whose members mostly have known surnames that are largely distinct from the surnames used by nonmembers: For example, the surname "Wong" may be distinctively Chinese, but "Lee" is not. Attempts to use surnames to identify Hispanics have resulted in false positive rates of about 12-15% and a false negative rates of about 20-30% (Passel and Word, 1980; Judkins et al., 1992), and these rates are likely to rise if intermarriage between Hispanics and non-Hispanics continues to increase (Harrison and Bennett, 1995). Even if a set of surnames uniquely identified members of a specified ethnic group, the population coverage of the telephone listing would be poor to the extent that the ethnic group had a high percentage of households without telephones or with unlisted numbers. A sample drawn from telephone listings would also be expensive to field in a household interview survey unless the racial/ethnic group were highly geographically clustered.

[3]Probability sampling designs are designs for which it is possible to estimate sampling variances because every unit in the population has a known nonzero chance of being selected.

[4]The only exception is that both the screener and questionnaire would be revised to collect data on Asian/Pacific Islander subgroups (see Chapter 6). Much research shows that in-person interviews

geographically clustered, then probability sampling of the subgroup can be extremely expensive because the costs of locating subgroup members can easily exceed interviewing costs (Kalton and Anderson, 1986; Sudman et al., 1988). Another key design issue is that, for any fixed overall survey budget, increasing the precision of estimates of drug use prevalence for small racial/ethnic subgroups will reduce the precision of estimates for subgroups that are not oversampled and for the total target population.

Since racial/ethnic subgroups in the U.S. differ substantially in size and in geographical distribution, the optimal sample design may vary from subgroup to subgroup. Based on 1990 census ancestry data, Native Americans make up only about 0.8% of the U.S. population, each of the three largest Asian/Pacific Islander subgroups (Chinese, Filipino, and Japanese) less than 0.4% (see Chiswick and Sullivan, 1995), Mexicans 5.4%, Puerto Ricans 1.1%, Central Americans 0.5%, and other Hispanic subgroups less than 0.5% (see Table 2.2).[5] Even if the population percentages of Asian and Hispanic subgroups increase rapidly in the next decade, as projected by the U.S. Bureau of the Census (see Chapter 1), probability sampling of these subgroups may continue to be difficult because of their diffuse geographic distributions in the U.S.

Table B1 presents estimated percentages of population ("%") and indexes of residential segregation ("S"), based on 1990 census data, of Asians, blacks, and Hispanics in all U.S. metropolitan areas and in selected metropolitan areas (Harrison and Bennett, 1995; Frey and Farley, 1996). The index S ranges from 0 (complete integration) to 100 (complete segregation) and is interpreted as the minimum percentage of the subgroup's population that would have to move to another census block group in order for the subgroup's population to have the same distribution across block groups as the total population of the metro area(s).[6] Table B1 shows that, in general, blacks are much more highly residentially segregated than either Asians or Hispanics, Hispanics tend to be slightly more segregated than Asians, and both blacks and Hispanics have larger population percentages than Asians. An exception is San Francisco, where Asians and Hispanics are about equally segregated and both comprise larger percentages (about 15%) of the population than blacks. Segregation indexes are not available for

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designed to encourage honest self-reporting are the best way to obtain valid data on drug use (e.g., NIDA, 1992).

[5]Population estimates for small racial/ethnic subgroups can vary substantially depending on how subgroups are defined using ancestry, race, language, and/or birthplace data in the 1990 census. The estimates of the population percentages of Asian subgroups in this paragraph are based on ancestry and are larger than corresponding estimates based on race, language, and birthplace (Barringer et al., 1993).

[6]The census block group is defined as a grouping of one or more adjacent census blocks with average population equal to about 564 persons in the 1990 census (Frey and Farley, 1996).

Native Americans within specific metropolitan areas, but Harrison and Bennett (1995) indicate that only about 51% of the approximately 2 million Native Americans in the U.S. lived in metropolitan areas in 1990, that Native Americans comprised only about 0.5% of the population of U.S. metropolitan areas, and that Native Americans in metropolitan areas were even less residentially segregated than Asians (about 35 vs. 40).[7] Given the difficulties of oversampling rare and diffusely distributed subgroups, these data explain why blacks are oversampled in most federal household surveys of the national population, why Hispanics are oversampled in many such surveys (NHIS as well as NHSDA), and why Native Americans, Asian Americans, and Asian subgroups are oversampled in few if any major federal surveys of the national household population.

Table B1. Percentages of population (%) and indexes of residential segregation (S) of Asians, blacks, and Hispanics. All U.S. metropolitan areas and selected metropolitan areas, 1990.[1]

Area	Racial/ethnic subgroup					
	Asians		Blacks		Hispanics	
	%	S	%	S	%	S
All U.S. metro areas	4	40	13	62	10	44
Chicago	3	54	19	86	11	66
Dallas	2	49	14	64	13	50
Houston	3	49	18	66	21	49
Los Angeles	9	45	8	66	33	53
Miami	1	40	17	74	33	56
New York	5	52	16	71	15	54
San Francisco	15	47	8	61	16	45
Washington, DC	5	39	26	66	6	41

1. The data for all metro areas in this table are taken from Harrison and Bennett (1995). The data for selected metro areas are from Frey and Farley (1996).

2 Specific Sample Design Options

This section presents details of four sampling approaches that might be used to obtain larger samples of small racial/ethnic subgroups in NHSDA. The four approaches are 1) increasing the NHSDA sample size, 2) oversampling of PSUs and areal segments, 3) household screening and subsampling, and

[7]Similarly, Massey et al. (1993) showed that 8% of blacks, 15% of Hispanics, 37% of Asian/ Pacific Islanders, and 47% of Native Americans resided in blocks with no more 10% of the residents belonging to the same subgroup; 62% of blacks, 40% of Hispanics, 13% of Asian/Pacific Islanders, and 30% of Native Americans resided in blocks with 60% or more belonging to the same subgroup.

4) network sampling. The four sample redesign options have competing advantages and disadvantages:

1. Increasing the NHSDA sample size. Increasing the NHSDA sample size by proportionally increasing the sampling fractions of all sampling domains is the simplest approach, but this approach is the most expensive. Of course, this needs to be considered in the context of the current NHSDA sample size and current plans. In 1998 the sample size will be approximately 25,000 persons, and in 1999 it will increase to approximately 70,000 persons in order to provide for state level estimation. Using the 1999 sample size as the new base level, for example, would imply that increasing the annual sample size of Native Americans to about 1,000 respondents would require increasing the annual overall sample size of the NHSDA by a factor of about 3, from about 70,000 respondents in the 1999 NHSDA to 210,000 in future NHSDAs, or combining 3 years of sample. Increasing the NHSDA overall sample size might be one element in a redesign aimed at increasing the precision of estimates for small racial/ethnic subgroups. Yet, in the interest of economy, this approach should probably be combined with other redesign options, especially #2 and #3. The key question is the extent to which other options can be used to *reduce* the increase in overall sample size that would otherwise be necessary to produce satisfactorily precise estimates for small racial/ethnic subgroups. Following Kalton and Anderson (1986), we refer to options that would substantially increase precision without greatly increasing costs as "effective."

2. Oversampling primary sampling units and areal segments: Like other major national household surveys, the NHSDA already increases the sample representation of blacks and Hispanics by oversampling geographical subareas with large concentrations of blacks and Hispanics at each stage of sample selection.[8] In the first two stages, relatively high probabilities of selection are assigned to PSUs (first-stage sampling units) and to areal segments within PSUs (second-stage sampling units) that contain high percentages of blacks and Hispanics according to the U.S. census. In the third stage, a sample of housing units within each sample segment is screened to identify households that contain Hispanics and blacks. The screening allows households with blacks and Hispanics to be sampled at higher rates than other households, while maintaining approximately equal probabilities of selection of households within each racial/ethnic category and age-sex domain and approximately equal interviewer workloads per sample segment (about nine interviews per segment). In the fourth stage, household members (up to a

[8]Like other major national household surveys, including NHIS and CPS, the NHSDA uses a multistage areal probability sample design. There are four stages of sampling: In the first stage, about 115 primary sampling units (PSUs) are randomly selected from a population of about 2,000 non-overlapping metropolitan and nonmetropolitan areas (counties and groups of counties) which divide up the entire land area of the U.S. In the second stage, area segments (subareas defined by combining adjacent blocks) are randomly selected from the PSUs. In the third stage, households are randomly selected from sample segments. In the fourth stage, household members are randomly selected from sample households.

maximum of two) are oversampled in Hispanic and black households.[9] With the overall expansion of the NHSDA sample in 1999, it is anticipated that adequate precision will be achieved for blacks and Hispanics without any oversampling.

The basic advantage of geographic oversampling is that statistics for a small subgroup are more precise if sample cases are drawn from geographic subareas in rough proportion to the numbers of subgroup members who live in those subareas. Unfortunately, even though geographic oversampling is effective in increasing the precision of estimates for blacks and Hispanics in the U.S., geographic oversampling would *not* greatly improve the precision of estimates for smaller racial/ethnic subgroups in the U.S. This is because, as shown by Kalton and Anderson (1986), two conditions are necessary for geographic oversampling to be effective: 1) a large percentage of the small subgroup should live in the geographic subareas that are oversampled and 2) the small subgroup should make up a substantial percentage of the total population in the subareas that are oversampled.[10] Reductions of more than 20% in costs occur if 40% or more of the small subgroup resides in subareas containing no more than 5% of the total population or if 80% or more of the small subgroup resides in subareas containing no more than 20% of the total population. As suggested by Table B1, these conditions are not satisfied for small racial/ethnic subgroups in the U.S. as a whole. The value of geographic oversampling may be even less for NHSDAs conducted at the end of the 1990s, because 1990 census data on the racial/ethnic compositions of metropolitan areas and block segments are likely to become seriously outdated.

Given appropriate definitions of sampling strata, the Kalton-Anderson (1986) conditions are likely to be much more closely satisfied within selected metropolitan areas than in the U.S. as a whole.

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[9] In the first stage selection of PSUs, the percentage of Hispanics in metropolitan areas was one criterion that was used to determine 43 sample PSUs (out of a total of 115) that were selected with certainty (i.e., probability 1.0). In the second stage selection of areal segments within PSUs, the segments of the 43 certainty PSUs were divided into five geographic strata based on 1990 census data on the racial and ethnic composition of these segments: 1) High Hispanic segments, 2) Moderate Hispanic segments, 3) Low Hispanic segments, 4) High black segments, and 5) High white segments. The segments of the 72 noncertainty PSUs are similarly divided into five strata, yielding a total of ten geographic strata. Without geographic oversampling, the screening costs for obtaining the targeted numbers of Hispanic and black completed interviews would be extremely high (RTI, 1995, p. 9).

[10] For simplicity, Kalton and Anderson (1986) assume that the element variance of the response variable is constant across geographic strata and that the costs of including subgroup and non-subgroup members in the sample are equal. Even if screening and subsampling within geographic subareas are not applied (see the next section), oversampling of areas where rare subgroups are concentrated increases the precision of rare subgroup statistics by allocating subgroup sample cases across subareas in a way that is more nearly in proportion to the subgroup populations of the subareas. Unless screening and subsampling within subareas are applied, on the other hand, this kind of geographic oversampling can reduce the precision of statistics for non-subgroup members and for the total population.

Many metropolitan areas where small racial/ethnic subgroups make up appreciable percentages of the population are already included with certainty as "self-representing PSUs" in the NHSDA sample (see Table B1). In at least two cases (Cubans in Miami; Puerto Ricans in New York), a large fraction of total U.S. subgroup members reside in a single metropolitan area. A cost-effective strategy would be to increase the sample size of each such PSU, while also increasing the selection probabilities of areal segments within the PSU that contained high percentages of the targeted subgroup.[11] A disadvantage of this approach is that precise inferences about the racial/ethnic subgroup would be restricted to individuals who lived in the oversampled metropolitan area. No satisfactorily precise estimates could be made for subgroup members who did not live in the oversampled metro area or for subgroup members in the U.S. as a whole.

3. *Screening of households with subsampling*: With screening, a large sample of households is selected, and a brief questionnaire is administered to a knowledgeable household resident to determine the racial/ethnic identifications of all of the household's residents. Households that include members of a targeted racial/ethnic subgroup are included in the sample with a higher probability than households that do not include such individuals. Since racial/ethnic data for specific households cannot legally be made available from the U.S. census, screening is essential if households containing subgroup members are to be oversampled within areal segments. In general, screening is effective only if the cost of screening a household is much smaller than the cost of conducting a complete interview.

In the NHSDA, screening of households for blacks and Hispanics is used in combination with geographic oversampling of high-black and high-Hispanic PSUs and segments, but screening might also be applied without oversampling PSUs and segments. In 1999, current plans are to screen approximately 250,000 households (approximately 400,000 persons) to obtain a sample of 70,000 respondents. This screening is needed in order to obtain sufficient numbers of persons age 12-17 in the sample. Given this

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[11]NHSDA's current technique of sampling block segments with probabilities proportional to a composite measure of size could be extended to simultaneously increase the sampling rate of a targeted small subgroup, such as Chinese-Americans, while continuing to oversample blacks and Hispanics. If r_1, r_2, and r_3 denote the sampling rates of the 3 racial/ethnic subgroups and N_{1i}, N_{2i}, and N_{3i} denote the numbers of subgroup members in the i-th segment of the metropolitan area, then areal segments would be selected with probabilities proportional to the composite

$$M_i = \sum r_j N_{ji}.$$

This sampling approach would yield the desired mix of subgroup members and makes the sample within each subgroup approximately self-weighting and the sample sizes per segment approximately equal.

large sample of screened households, it would not be very costly to screen for race/ethnic minorities age 18 and older, because numbers of them would be found in the approximately 180,000 (surplus) households screened but not interviewed. It needs to be noted that most of the additional persons are in the oldest age groups, and that there are increasingly fewer "surplus" households as the age decreases, culminating in zero "surplus" households for ages 12-17. Of course, in addition to any extra screening required, any increase in the actual number of interviews would increase the survey costs proportionately. In other circumstances, the cost of screening a household for detailed racial/ethnic composition can be high, probably more than one-third the cost of conducting a standard interview.[12]

Like geographic oversampling, screening with subsampling would be more cost-effective when applied to metropolitan areas where a targeted small racial/ethnic subgroup makes up a large percentage of the population. The most effective strategy for sampling rare subgroup members within a selected metropolitan area would be to combine geographic oversampling of areal segments with high subgroup concentrations (option #2) with screening and subsampling of subgroup households within areal segments (option #3).[13]

4. *Network sampling and related approaches.* Network sampling (or multiplicity sampling as it is also called) would increase the information about rare subgroup members that is collected using the screener (option #3). If one or more rare subgroup members were found in a sample household, the screener would also ascertain not only the racial/ethnic identifications of all household members but also the names, addresses, telephone numbers, and racial/ethnic identifications of specified relatives of household members, such as parents, siblings, and children (Sirken, 1970). NHSDA interviewers would interview subgroup members living in the household and would also locate, track, and interview specified relatives living outside the household. Given the concentration of kinship ties within local areas, it would be economical to follow up only those relatives who were living in the same PSU as the screened household or within other NHSDA sample PSUs. Methods of appropriately weighting and

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[12]The Census Bureau estimated that screening for racial/ethnic composition costs one-third as much as a standard NHIS interview (Waksberg, 1995). The average interview in NHIS, like the average interview in NHSDA, lasts about one hour. Kalton and Anderson (1986) point out that effective screening requires keeping the false negative rate low, which suggests using a less stringent criterion for identifying members of the rare subgroup, e.g., a screener that allows multiple ancestries.

[13]Without screening and subsampling within areal segments, geographic oversampling of areal segments within the metropolitan area would reduce the effectiveness of the overall sample design. Specifically, whites (and other non-subgroup individuals) who lived in segments with high subgroup representation would have a greater chance of being sampled than whites in predominantly white segments. Without screening, these unequal selection probabilities would result in a loss of precision in estimates of drug use prevalence for whites and for the total metropolitan area.

analyzing data from network samples have been developed in recent years (e.g., Sirken, 1972; Czaja et al., 1986; Thompson, 1992).[14]

For the purpose of oversampling small racial/ethnic subgroups in the NHSDA, network sampling has four principal disadvantages:

- Respondents might be unable or unwilling to provide accurate and complete data on the race/ethnicities and addresses of relatives who are not living in the same household. In fact, the NHSDA does not currently collect either names or addresses because of the sensitive nature of the questions.
- The costs of extending the screener and of following up and interviewing relatives might be substantial, even if the sample were restricted to one or more metropolitan areas.
- Planning a network sample requires data on the sizes of familial networks and on the "network counting rules," i.e., rules linking any individual in the target population to their own and to their relatives' households. This information is not currently available for small racial/ethnic subgroups in the U.S.
- The gains in statistical precision from network sampling might be small relative to the increases in the sample sizes of rare subgroup members. The reason is that measures of substance use prevalence are likely to be positively correlated among members of the same familial network. For example, parents influence children and siblings influence each other in their decisions to use drugs. If so, design effects due to clustering of individual respondents within familial networks are likely to be appreciable.

[14]For an estimate to be unbiased, individuals who are eligible to enter the sample through the selection of n different households must be weighted by 1/n. The increased information obtained from networks is offset somewhat by reduced sample efficiency due to the variability of the weights.

Table B2 summarizes our assessments of the four redesign options.

Table B2. Assessment of four NHSDA sample redesign options.

Option	Advantages	Disadvantages	Overall assessment
1. Increase the NHSDA sample size	Simplicity	Expense	Increases already planned will help significantly.
2. Oversampling PSUs and areal segments	Less expensive than a nonclustered sample	Not effective for small subgroups in U.S.; Depends on out-of-date 1990 census data	Effective in metros with high subgroup concentration when combined with #3
3. Screening of households with subsampling	Improves sampling efficiency when compared to #1	May not result in sufficient sample sizes for some small subgroups in the national population.	Effective given current plans for 1999, especially for metros with high subgroup concentration
4. Network sampling and related approaches	Permits the identification of rare population members without screening	Needs feasibility testing and data on network sizes not currently available. Precision reduced by intra-family correlation.	Quality of data on relatives outside the household and follow-up costs are major concerns.

3 Summary and Conclusions

The preceding section suggests that the screening and within-household oversampling of specified population groups given the larger planned sample sizes in 1999 and beyond would be the most cost effective method of improving the precision of estimates for race/ethnic subgroups. If the goal were to sample 1,000 persons in a specified race/ethnic minority, then the overall sample size would need to be increased for each such group for which estimates are desired. Otherwise, varying probabilities of selection would result in lower precision for all other estimates.

Also, oversampling small racial/ethnic subgroups in one or more metropolitan areas where they are highly concentrated might be an especially effective sample redesign option. Table B1 shows that such oversampling might be feasible for specific subgroups within specified metropolitan areas. For

example, Asians (mostly Chinese and Filipinos) comprised about 15% of the population of San Francisco in 1990, and Asians were more highly segregated in San Francisco than in all metro areas (47 vs. 40). Based on U.S. Bureau of the Census (1992c), other metropolitan areas that might be suitable for oversampling specific racial/ethnic subgroups include Miami (18% Cuban), New York City (7% Puerto Rican), Los Angeles (26% Mexican), and Honolulu (23% Japanese). Three techniques might be used to increase the yield of rare subgroup members within metropolitan areas where they are concentrated: 1) oversampling of areal segments containing high percentages of the subgroup, 2) screening of households within segments and oversampling of those containing subgroup members, and 3) oversampling of subgroup members within sample households.[15]

Yet the approach of oversampling rare subgroups in selected metropolitan areas also has some disadvantages:

- Data from oversampled metropolitan area(s) cannot generally be used to make estimates for the population of rare subgroups in the U.S. as a whole. Only if subgroup members in the oversampled area(s) comprised a very large fraction (say 75% or more) of total subgroup members in the U.S. would it be defensible to compute estimates of the subgroups' drug use prevalence in the total U.S. by "poststratifying" estimates of the subgroups' drug use prevalence in the oversampled area(s). [16]
- Effective oversampling of metropolitan areas depends on accurate data on the racial/ethnic compositions of subareas, tracts and block groups, within the metropolitan areas, but tract and block data from the 1990 census are likely to be seriously outdated by the late 1990s.
- Oversampling of selected metropolitan areas would not be effective for Native Americans. Only about 51% of Native Americans live in major metropolitan areas, and these Native Americans

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[15]The approach combines elements of several of the sampling approaches discussed in the preceding section: First, the metropolitan area containing a large concentration of the targeted subgroup would be included in the NHSDA sample with certainty. Second, area segments in the metropolitan area that contained a large percentage of targeted subgroup members, according to the U.S. Census, would be selected with higher probabilities than other segments. Third, households within selected area segments would be screened for members of the targeted subgroup, and households containing targeted subgroup members would be included in the sample with higher probabilities than other households.

[16]The basic idea of poststratification is simple: One first computes the estimated percentages of subgroup members ever using a specified drug separately for age-sex domains of the oversampled metropolitan areas, then multiplies each estimated percentage by the corresponding proportion of the *national* subgroup population in the age-sex domain (as estimated from the U.S. Census), and finally adds the products across age-sex domains to obtain an estimated percentage for the national population of the subgroup. Unfortunately, such poststratified national estimates can be highly biased unless the oversampled metropolitan area(s) contain a large fraction of total subgroup members in the U.S.

are not highly concentrated in any single metropolitan area (Harrison and Bennett, 1995). While 30% of Native Americans live on reservations or in other areas where Native Americans are highly concentrated, the remaining 70% live mostly in areas that contain 90% or more non-Native Americans (Massey et al., 1993). [17]

This report illustrates the potential uses as well as the limitations of an approach to improving estimates for small racial/ethnic subgroups that does not require redesign of the NHSDA sample. By pooling data across three unusually large NHSDAs conducted between 1991 and 1993, we were able to estimate overall drug use (i.e., not controlling for age, sex, or other covariates) of Native Americans, Asian/Pacific Islanders, and seven subclasses of Hispanics and to provide more detailed estimates of drug use (i.e., controlling for age, sex, and other covariates) for Asian/Pacific Islanders and four somewhat more broadly defined subclasses of Hispanics.

[17]A variant of the approach of oversampling metropolitan areas applicable to Native Americans would be to select a supplementary stratified multistage sample of the approximately 30% of Native Americans who live on reservations. Reservations would be sampled in the first stage and households within reservations in the second stage. To ensure representation of major tribal affiliations, the sample of reservations could be stratified by region and selected with probabilities proportional to population size. A disadvantage is that conclusions could be made only about Native Americans on reservations.

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